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MATT BLUNT

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SECRETARY OF STATE

MAT T BLUNT

Administrative Rules Division
James C. Kirkpatrick State Information Center
600 W. Main
Jefferson City, MO 65101
(573) 751-4015

DIRECTOR

LYNNE C. ANGLE

•

EDITORS

BARBARA McDOUGAL

KATHREN CHOATE

•

ASSOCIATE EDITORS

CURTIS W. TREAT

SALLY L. REID

JAMES McCLURE

•

PUBLISHING STAFF

CARLA HERTZING

WILBUR HIGHBARGER

SANDY SANDERS

JOHN STEGMANN

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Administrative Rules Division
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Documents will be accepted for filing on all regular workdays from 8:00 a.m. until 5:00 p.m. We encourage early filings to facilitate the timely publication of the *Missouri Register*. Orders of Rulemaking appearing in the *Missouri Register* will be published in the *Code of State Regulations* and become effective as listed in the chart above. Advance notice of large volume filings will facilitate their timely publication. We reserve the right to change the schedule due to special circumstances. Please check the latest publication to verify that no changes have been made in this schedule.

Missouri Depository Libraries

The *Missouri Register* and the *Code of State Regulations*, as required by the Missouri Depository Documents Law (section 181.100, RSMo 2000), are available in the listed depository libraries, as selected by the Missouri State Library:

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HOW TO CITE RULES AND RSMo

RULES—Cite material in the *Missouri Register* by volume and page number, for example, Vol. 26, *Missouri Register*, page 27. The approved short form of citation is 26 MoReg 27.

The rules are codified in the *Code of State Regulations* in this system—

Title	Code of State Regulations	Division	Chapter	Rule
1	CSR	10-	1.	010
Department		Agency, Division	General area regulated	Specific area regulated

They are properly cited by using the full citation , i.e., 1 CSR 10-1.010.

Each department of state government is assigned a title. Each agency or division in the department is assigned a division number. The agency then groups its rules into general subject matter areas called chapters and specific areas called rules. Within a rule, the first breakdown is called a section and is designated as (1). Subsection is (A) with further breakdown into paragraph 1., subparagraph A., part (I), subpart (a), item I. and subitem a.

RSMo—Cite material in the RSMo by date of legislative action. The note in parentheses gives the original and amended legislative history. The Office of the Revisor of Statutes recognizes that this practice gives users a concise legislative history.



FROM THIS ANGLE....

First Organizational Meeting

The first organizational meeting of our “Users’ Group” to undertake the rewrite of our rulemaking manual is, *at last*, scheduled. Mark your calendars, plan to attend and participate! We will hold our organizational meeting on Wednesday, May 31, 2001, from 9:00 – 11:00 a.m., in the Interpretive Center located in our building, the James C. Kirkpatrick Information Center, 600 West Main Street, here in Jefferson City. Please bring your notes, suggestions, tips, and thinking caps! We plan to provide you with a *very rough*, first draft and are looking forward to editing this edition, as we work together to prepare a more “user friendly” product.

If you have volunteered your time, you should receive an e-mail or letter from us; if *we* have volunteered your time, you should receive an e-mail or letter from us. If you still wish to volunteer, but have had no contact from/with our office, please feel free to attend. The more input and help we receive, the better our product will be!

It would be helpful to us to know approximately how many “users” will be attending. Therefore, please drop us an e-mail or give us a call at 751-4015.

For those of you who simply do not have the time to attend a users’ group meeting – but have suggestions/tips you would like to share, please feel free to e-mail those suggestions to us at our e-mail address which is: rules@sosmail.state.mo.us. We appreciate your input and need your suggestions/tips.

Delegation of Authority Signatures

With the change of administration, we are aware there are many new names and faces of the people in charge of various departments and divisions of state government. Please, please provide us with a letter stating who the Directors are in your Department/Division, and, also, please provide us with a written record of their signature. Further, in the event someone else is authorized to sign for the

Director in his or her absence, please provide us with those signatures as well. This is a very important piece of information we need to maintain in our files so that we allow filing of rules on behalf of your agency only by those persons designated to do so by your respective agency.

A handwritten signature in cursive script, appearing to read "Lynne".

**Lynne C. Angle, Director
Administrative Rules Division**

Under this heading will appear the text of proposed rules and changes. The notice of proposed rulemaking is required to contain an explanation of any new rule or any change in an existing rule and the reasons therefor. This is set out in the Purpose section with each rule. Also required is a citation to the legal authority to make rules. This appears following the text of the rule, after the word "Authority."

Entirely new rules are printed without any special symbology under the heading of the proposed rule. If an existing rule is to be amended or rescinded, it will have a heading of proposed amendment or proposed rescission. Rules which are proposed to be amended will have new matter printed in boldface type and matter to be deleted placed in brackets.

An important function of the *Missouri Register* is to solicit and encourage public participation in the rule-making process. The law provides that for every proposed rule, amendment or rescission there must be a notice that anyone may comment on the proposed action. This comment may take different forms.

If an agency is required by statute to hold a public hearing before making any new rules, then a Notice of Public Hearing will appear following the text of the rule. Hearing dates must be at least 30 days after publication of the notice in the *Missouri Register*. If no hearing is planned or required, the agency must give a Notice to Submit Comments. This allows anyone to file statements in support of or in opposition to the proposed action with the agency within a specified time, no less than 30 days after publication of the notice in the *Missouri Register*.

An agency may hold a public hearing on a rule even though not required by law to hold one. If an agency allows comments to be received following the hearing date, the close of comments date will be used as the beginning day in the 90-day-count necessary for the filing of the order of rulemaking.

If an agency decides to hold a public hearing after planning not to, it must withdraw the earlier notice and file a new notice of proposed rulemaking and schedule a hearing for a date not less than 30 days from the date of publication of the new notice.

Proposed Amendment Text Reminder:

Boldface text indicates new matter.

[Bracketed text indicates matter being deleted.]

Title 4—DEPARTMENT OF ECONOMIC DEVELOPMENT

Division 120—State Board of Embalmers and Funeral Directors

Chapter 2—General Rules

PROPOSED AMENDMENT

4 CSR 120-2.100 Fees. The board is proposing to amend subsections (1)(C), (1)(E), (1)(F), (1)(H), (1)(J), (1)(K), (1)(N) and (1)(P).

PURPOSE: *The State Board of Embalmers and Funeral Directors is statutorily obligated to enforce and administer the provisions of Chapter 333, RSMo. Pursuant to section 333.III, RSMo, the board shall by rule and regulation set the amount of fees authorized by*

Chapter 333, RSMo so that the revenue produced is sufficient, but not excessive, to cover the cost and expense to the board for administering the provisions of Chapter 333, RSMo. This proposed amendment is necessary because the board's fund balance and projected revenue will not support the expenditures necessary to enforce and administer the provisions of Chapter 333, RSMo, which will result in an endangerment to the health, welfare, and safety of the public.

(1) The following fees hereby are established by the State Board of Embalmers and Funeral Directors:

(C) Embalmer Apprenticeship Registration Fee	[\$ 100.00] \$200.00
(E) Embalmer Reciprocity Application Fee	[\$ 200.00] \$300.00
(F) Embalmer Biennial Renewal Fee	[\$ 130.00] \$200.00
(H) Funeral Director Application Fee	[\$ 100.00] \$200.00
(J) Funeral Director Reciprocity Application Fee	[\$ 200.00] \$300.00
(K) Funeral Director Biennial Renewal Fee	[\$ 130.00] \$200.00
(N) Establishment Application Fee	[\$ 200.00] \$300.00
(P) Establishment Biennial Renewal Fee	
Prior to January 1, 2002	\$190.00
Effective January 1, 2002	\$250.00

AUTHORITY: *section 333.III.1, RSMo [Supp. 1999] 2000. Emergency rule filed June 30, 1981, effective July 9, 1981, expired Nov. 11, 1981. Original rule filed June 30, 1981, effective Oct. 12, 1981. For intervening history, please consult the Code of State Regulations. Amended: Filed April 6, 2001.*

PUBLIC COST: *This proposed amendment is estimated to cost state agencies or political subdivisions less than \$500 in the aggregate.*

PRIVATE COST: *This proposed amendment will cost private entities an estimated increase of \$268,800 during fiscal year 2002; an estimated increase of \$19,500 during fiscal year 2003 and each year thereafter; and an estimated increase of \$302,500 during fiscal year 2004 and each biennial year thereafter for the life of the rule. It is anticipated that the total increase will recur for the life of the rule, may vary with inflation and is expected to increase at the rate projected by the Legislative Oversight Committee. A detailed fiscal note, which estimates the cost of compliance with this rule, has been filed with the secretary of state.*

NOTICE TO SUBMIT COMMENTS: *Anyone may file a statement in support of or in opposition to this proposed amendment with the State Board of Embalmers and Funeral Directors, Patricia A. Handly, Executive Director, 3605 Missouri Boulevard, PO Box 423, Jefferson City, MO 65102. To be considered, comments must be received within thirty days after publication of this notice in the Missouri Register. No public hearing is scheduled.*

**FISCAL NOTE
PRIVATE ENTITY COST**

I. RULE NUMBER**Title:** Title 4 – Department of Economic Development**Division:** 120 – Embalmers and Funeral Directors**Chapter:** 2 – General Rules**Type of Rulemaking:** Proposed Amendment**Rule Number and Name:** 4 CSR 120-2.100 Fees**II. SUMMARY OF FISCAL IMPACT****FISCAL INCREASE DURING FISCAL YEAR 2002**

Estimate of the number of entities by class which would likely be affected by the adoption of the proposed rule:	Classification by types of the business entities which would likely be affected:	Estimate annual cost of compliance with the rule by the affected entities:
15	Embalmer Apprenticeship Registration Applicants (\$100 increase)	\$1,500
50	Funeral Director Applicants (\$100 increase)	\$5,000
20	Establishment Applicants (\$100 increase)	\$2,000
5	Embalmer Reciprocity Applicants (\$100 increase)	\$500
8	Funeral Director Reciprocity Applicants (\$100 increase)	\$800
1200	Embalmer Biennial Renewal (\$70.00 increase)	\$84,000
2500	Funeral Director Biennial Renewal (\$70.00 increase)	\$175,000

**TOTAL ESTIMATED FISCAL INCREASE \$268,800
DURING FISCAL YEAR 2002**

FISCAL INCREASE DURING FISCAL YEAR 2003 AND EACH YEAR THEREAFTER

Estimate of the number of entities by class which would likely be affected by the adoption of the proposed rule:	Classification by types of the business entities which would likely be affected:	Estimate annual cost of compliance with the rule by the affected entities:
30	Embalmer Apprenticeship Registration Applicants (\$100 increase)	\$3,000
100	Funeral Director Applicants (\$100 increase)	\$10,000

40	Establishment Applicants (\$100 increase)	4,000
10	Embalmer Reciprocity Applicants (\$100 increase)	1,000
15	Funeral Director Reciprocity Applicants (\$100 increase)	\$1,500

**TOTAL ESTIMATED FISCAL INCREASE
DURING FISCAL YEAR 2003 AND EACH
YEAR THEREAFTER FOR THE LIFE OF
THE RULE** **\$19,500**

**FISCAL INCREASE DURING FISCAL YEAR 2004 AND EACH BIENNIAL YEAR
THEREAFTER**

Estimate of the number of entities by class which would likely be affected by the adoption of the proposed rule:	Classification by types of the business entities which would likely be affected:	Estimate annual cost of compliance with the rule by the affected entities:
1200	Embalmer Biennial Renewal - (\$70.00 increase)	\$84,000
2500	Funeral Director Biennial Renewal - (\$70.00 increase)	\$175,000
725	Establishment Biennial Renewal - (\$60 increase)	\$43,500

**TOTAL ESTIMATED FISCAL INCREASE
DURING FISCAL YEAR 2004 AND EACH
BIENNIAL YEAR THEREAFTER FOR THE
LIFE OF THE RULE** **\$302,500**

III. WORKSHEET

See Table above.

IV. ASSUMPTIONS

- The number of entities used in this fiscal note are based on actual figures from FY00 and projected figures in FY01.
- The board estimates that this rule amendment will become effective approximately October 30, 2001. In order to estimate the fiscal increase for fiscal year 2002, the board estimates the following number of applications will be received between November, 2001 and June 30, 2002:
 - 15 Embalmer Apprenticeship Registration Applications
 - 50 Funeral Director Applications
 - 20 Establishment Applications
 - 5 Embalmer Reciprocity Applications
 - 8 Funeral Director Reciprocity Applications

In addition to the above application fees, the board also anticipates 1,200 embalmer licensees and 2,500 funeral director licensees will renew their license between March 1, 2002 and May 30, 2002. Therefore, the board estimates that private entities will incur an estimated increase of \$268,800 during fiscal year 2002.

- The board also estimates the following number of applications will be received during fiscal year 2003 and each year thereafter:

- 30 Embalmer Apprenticeship Registration Applications
 - 100 Funeral Director Applications
 - 40 Establishment Applications
 - 10 Embalmer Reciprocity Applications
 - 15 Funeral Director Reciprocity Applications

Therefore, the board estimates that private entities will incur an estimated annual increase of \$19,500 during fiscal year 2003 and each year thereafter for the life of the rule.

- The board further estimates that during fiscal year 2004 the following number of licensees will renew their license:

- 1200 Embalmer Licensees
 - 2500 Funeral Director Licensees
 - 725 Establishments

The board estimates that private entities will incur an estimated \$302,500 biennially.

- It is anticipated that the total increase will recur for the life of the rule, however, may vary with inflation and is expected to increase at the rate projected by the Legislative Oversight Committee.

**Title 4—DEPARTMENT OF ECONOMIC
DEVELOPMENT
Division 145—Missouri Board of Geologist Registration
Chapter 1—General Rules**

PROPOSED AMENDMENT

4 CSR 145-1.040 Fees. The board is proposing to amend section (1).

PURPOSE: This amendment allows licensees who renew their license late to pay a lesser penalty fee. The board is also proposing to delete subsection (1)(K) pursuant to section 610.026, which states fees for copying records shall not exceed the actual cost of document search and duplication.

(1) The following fees are established by the Board of Geologist Registration and are payable in the form of a cashier's check, personal check or money order:

(F) License Renewal Fee \$100.00
and in addition—

1. One (1) day to [60 (1–60) days] two
(2) years late; \$ 50.00

[and]

2. Sixty-one (61) days to two (2) years
late \$200.00]

[(I) Computer Printout and Copy Fee (per page) \$.50]

[(J)] (I) Educational Review \$ 35.00

[(K)] (J) Insufficient Funds Check Fee Charge \$ 50.00

[and]

(L) Research Fee (per hour; one-half hour
minimum) \$ 5.00]

AUTHORITY: section 256.465.2, RSMo [1994] 2000. Emergency rule filed June 29, 1995, effective July 9, 1995, expired Nov. 5, 1995. Original rule filed Sept. 28, 1995, effective May 30, 1996. Amended: Filed April 13, 2001.

PUBLIC COST: This proposed amendment will result in a decrease of \$5,250 annually to the Missouri Board of Geologist Registration Fund for the life of the rule. It is anticipated that the loss will recur annually for the life of the rule, may vary with inflation and is expected to increase at the rate projected by the Legislative Oversight Committee. A detailed fiscal note, which estimates the cost of compliance with this rule, has been filed with the secretary of state.

PRIVATE COST: This proposed amendment is estimated to save private entities \$5,250 annually for the life of the rule as a result of the late penalty fee decrease. It is anticipated that the total costs will recur annually for the life of the rule, may vary with inflation and is expected to decrease at the rate projected by the Legislative Oversight Committee. A detailed fiscal note, which estimates the cost of compliance with this rule, has been filed with the secretary of state.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Missouri Board of Geologist Registration, Pamela Groose, Executive Director, PO Box 1335, Jefferson City, MO 65102-1335. To be considered, comments must be received within thirty days after publication of this notice in the Missouri Register. No public hearing is scheduled.

**FISCAL NOTE
PUBLIC ENTITY COST****I. RULE NUMBER****Title:** 4 -- Department of Economic Development**Division:** 145 -- Missouri Board of Geologist Registration**Chapter:** 2 -- Licensure Requirements**Type of Rulemaking:** Proposed Rule**Rule Number and Name:** 4 CSR 145-1.040 Fees**II. SUMMARY OF FISCAL IMPACT**

Affected Agency or Political Subdivision	Estimated Loss of Revenue
Missouri Board of Geologist Registration (35 licensees saving an estimated \$150 annually)	\$5,250.00
Total Estimated Loss of Revenue For the Life of the Rule	
	\$5,250.00

III. WORKSHEET

See table above.

IV. ASSUMPTIONS

1. The board estimates 50 licensees renew their license annually after the expiration date. Of these 50 licensees, the board estimates that 35 of those individuals renew at least 60 days after the expiration date. Therefore, the board estimates this amendment will result in a decrease of \$5,250 annually to the Missouri Geologists Registration Fund for the life of the rule.
2. These annual costs will recur each year for the life of the rule, may vary with inflation and are expected to increase annually at the rate projected by the Legislative Oversight Committee.

**FISCAL NOTE
PRIVATE ENTITY COST**

I. RULE NUMBER

Title: 4 -- Department of Economic Development

Division: 145-Missouri Board of Geologist Registration

Chapter: 1-General Rules

Type of Rulemaking: Proposed Amendment

Rule Number and Name: 4 CSR 145-1.040 Fees

Prepared April 6, 2001 by the Division of Professional Registration and the Missouri Board of Geologist Registration.

II. SUMMARY OF FISCAL IMPACT

Estimate of the number of entities by class which would likely be affected by the adoption of the proposed rule:	Classification by types of the business entities which would likely be affected:	Estimate annual cost of compliance with the rule by the affected entities:
35	Licenseses (renewing 61 days – 2 years after the expiration of the license) cost savings of \$150.00	\$5,250.00
Total Cost Savings for the Life of the Rule		\$5,250.00

III. WORKSHEET

See Table Above

IV. ASSUMPTIONS

1. The board estimates 50 licenseses renew their license after the expiration date. Of these 50 licenseses, the board estimates that 35 of those individuals renew at least 60 days after the expiration date. Therefore, the board anticipates that 35 individuals will be affected by this amendment.
2. It is anticipated that the total savings will recur for the life, may vary with inflation and is expected to increase at the rate projected by the Legislative Oversight Committee.

**Title 4—DEPARTMENT OF ECONOMIC
DEVELOPMENT**
**Division 150—State Board of Registration for the
Healing Arts**
Chapter 2—Licensing of Physicians and Surgeons

PROPOSED AMENDMENT

4 CSR 150-2.050 [Annual] Biennial Registration Penalty. The board is proposing to amend the title, section (1) and the original Purpose statement.

PURPOSE: This amendment allows the board to implement a biennial renewal.

PURPOSE: This rule provides information to physicians and surgeons permanently licensed in Missouri regarding penalty of not registering [annually] biennially.

(1) Whenever a licensed practitioner fails to renew his/her registration for any period in excess of six (6) months after the expiration of his/her last [prior] registration, his/her application for renewal of registration shall be denied unless it is accompanied by all fees required by statute, **4 CSR 150-2.125** and this rule, together with a [statement of all addresses where s/he has practiced and resided since the expiration of his/her last period of registration, the nature of his/her practice since the expiration and whether, since the expiration, any license or right of his/her to practice in any other state or country has been suspended or revoked; whether s/he has been the subject of any disciplinary action by any licensing agency of any state or country or by any professional organization or society; whether s/he has been charged or convicted of any crime in any court of any state or country; whether s/he has been addicted to a drug habit or has been guilty of any unprofessional or dishonorable conduct as defined by section 334.100, RSMo, and all details pertaining to all such occurrences. This statement shall be completed upon forms provided by the executive secretary and shall be made by the applicant under oath.] **completed renewal application.** The application shall be made under oath on a form furnished by the board. The application shall include, but not be limited to, disclosure of the following: the applicant's full name and the office and residence addresses and the issuance date and number of the license; all final disciplinary actions taken against the applicant by any professional medical or osteopathic association or society, licensed hospital or medical staff of the hospital, state, territory, federal agency or country; and information concerning the applicant's current physical and mental fitness to practice as a physician and surgeon.

AUTHORITY: sections 334.075, 334.080 and 334.125, RSMo [1986] 2000. Original rule filed Dec. 19, 1975, effective Dec. 29, 1975. Amended: Filed July 3, 1989, effective Dec. 1, 1989. Amended: Filed April 13, 2001.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than \$500 in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than \$500 in the aggregate.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Missouri Board of Healing Arts, 3605 Missouri Boulevard, PO Box 4, Jefferson City, MO 65102. To be considered, comments must be received within thirty days after publication of this notice in the Missouri Register. No public hearing is scheduled.

**Title 4—DEPARTMENT OF ECONOMIC
DEVELOPMENT**
**Division 150—State Board of Registration for the
Healing Arts**
Chapter 2—Licensing of Physicians and Surgeons

PROPOSED AMENDMENT

4 CSR 150-2.080 Fees. The board is proposing to amend section (1).

PURPOSE: This amendment allows the board to implement a biennial renewal, decrease the renewal fee and increases the continuing education extension fee due to the amount of time for processing such requests. Fees for document searches and duplication are being deleted pursuant to section 610.026, which states fees for copying records shall not exceed the actual costs.

(1) The following fees are established by the State Board of Registration for the Healing Arts:

(J) Renewal of Certificate of Registration	
Fee	[\$120.00] 200.00
(M) Fee for Renewing Limited License	\$ [25.00] 50.00
(P) Delinquent Fee	\$ [25.00] 50.00
(Q) Continuing Medical Education Extension	
Fee	\$ [15.00] 50.00
[(R) Photocopy Fee—public records (per page)]	\$.25
[(S) Document Search Fee—public records (per hour)]	\$ 20.00
with a minimum fee of	\$ 5.00
[(T) Access Fee—public records maintained on computer facilities, recording tapes or discs, video tapes or films, pictures, slides, graphics, illustrations or similar audio or visual items or devices. Actual cost of reproduction plus document search fee (per hour)]	\$ 20.00
with a minimum fee of	\$ 5.00]
[(U)] (R) Duplicate License Fee	\$ 30.00.

AUTHORITY: sections 334.090.2], RSMo 1994] and 334.125, RSMo 2000 [and 610.026, RSMo Supp. 1999]. Emergency rule filed July 1, 1981, effective July 11, 1981, expired Nov. 8, 1981. Original rule filed July 14, 1981, effective Oct. 11, 1981. For intervening history, please consult the Code of State Regulations. Amended: Filed April 13, 2001.

PUBLIC COST: This proposed amendment is estimated to cost state agencies and political subdivisions an estimated \$2,495.14 biennially for the life of the rule. It is anticipated that the total cost will recur biennially for the life of the rule, may vary with inflation and is expected to increase biennially at the rate projected by the Legislative Oversight Committee. A detailed fiscal note, which estimates the cost of compliance with this rule, has been filed with the secretary of state.

PRIVATE COST: This proposed amendment is estimated to cost private entities an increase of \$6,510 biennially for the life of the rule as a result of the continuing medical education extension fee increase; and a cost savings of \$746,000 biennially with a continuous cost savings of \$81,440 biennially for the life of the rule as a result of the renewal fee decrease. It is anticipated that the total costs will recur biennially for the life of the rule, may vary with inflation and is expected to increase biennially at the rate projected by the Legislative Oversight Committee. A detailed fiscal note, which estimates the cost of compliance with this rule, has been filed with the secretary of state.

*NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Missouri Board of Healing Arts, 3605 Missouri Boulevard, PO Box 4, Jefferson City, MO 65102. To be considered, comments must be received within thirty days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.*

[illegible]

The above staff salaries were calculated using the following formula:

Employee's salaries were calculated using their annual salary multiplied by 33.33% for fringe benefits and then was divided by 2080 hours per year to determine the hourly salary. The hourly salary was then divided by 60 minutes to determine the cost per minute. The cost per minute was then multiplied by the amount of time individual staff spent on the processing requests for extensions. The total cost was based on the cost per requests multiplied by the estimated 186 licensees.

The Chair of the Licensure Committee receives per diem for reviewing continuing medical education extension requests. Based on the estimated 186 licensees to request such an extension, the board anticipates the Chair of the Licensure Committee spends approximately 4 days each renewal period reviewing such requests and receives \$200.00 per diem each biennial renewal period.

BIENNIAL COST OF COMPLIANCE: \$2,495.14

IV. ASSUMPTIONS

- It is estimated that the following staff time will be devoted on each application for registration and devoted to the following duties:

Clerk Stenographer II – .5 hour per licensee

Duties: telephone time devoted to applicants requesting continuing medical education extension forms, mailing forms to licensees, processing the requests for continuing medical education extensions, providing written correspondence to the licensee, mailing request to the Chair of the Licensure Committee, and notifying the licensee of the board's decision.

Executive Director -- 5 minutes per licensee

Duties: Discussion with the Chair of the Licensure Committee regarding continuing medical education extension request and relaying the chair's decision to the Clerk Stenographer II.

- It is anticipated that the total cost will recur biennially for the life of the rule, however, may vary with inflation and is expected to increase at the rate projected by the Legislative Oversight Committee.

**FISCAL NOTE
PRIVATE ENTITY COST**

I. RULE NUMBER

Title: 4 - Department of Economic Development

Division: 150 - State Board of Registration for the Healing Arts

Chapter: 2 - Licensing of Physicians and Surgeons

Type of Rulemaking: Proposed Amendment

Rule Number and Name: 4 CSR 150-2.080 Fees

II. SUMMARY OF FISCAL IMPACT

Biennial Increase

Estimate of the number of entities by class which would likely be affected by the adoption of the proposed rule:	Classification by types of the business entities which would likely be affected:	Estimate Biennial Increase of Compliance for the Life of the Rule:
186	Physicians and Surgeons Continuing Education Extension Increase @ \$35.00	\$6,510

**Total Biennial Increase for
the life of the rule:**

\$6,510

Biennial Decrease

Estimate of the number of entities by class which would likely be affected by the adoption of the proposed rule:	Classification by types of the business entities which would likely be affected:	Estimate Cost Savings for Compliance for the Life of the Rule:
18,650	Physicians and Surgeons Renewal of Certificate of Registration Fee Decrease @ \$40.00	\$746,000

**Total Biennial Cost Savings
for the life of the rule:**

**\$746,000 biennially with a
continuous costs savings
of \$81,440 biennially
for the life of the rule**

III. WORKSHEET

See above table.

IV. ASSUMPTIONS

1. Based on figures from calendar year 2000, the board estimates that approximately 186 licensed physicians and surgeons will apply for a continuing medical education extension each renewal period. The private entity cost for this proposed rule is estimated to be \$6,510 biennially for the life of the rule as a result of the continuing medical education extension fee increase.
2. Currently 18,650 physicians and surgeons are licensed by the board. The board anticipates an annual growth rate of 1.018. Therefore, the board estimates that private entities will incur a cost savings of \$746,000 biennially with a continuous cost savings of \$81,440 biennially for the life of the rule as a result of the renewal fee decrease.
3. It is anticipated that the total biennial cost will recur each year for the life of the rule, however, may vary with inflation and is expected to increase annually at the rate projected by the Legislative Oversight Committee.

**Title 4—DEPARTMENT OF ECONOMIC
DEVELOPMENT
Division 150—State Board of Registration for the
Healing Arts
Chapter 2—Licensing of Physicians and Surgeons**

PROPOSED AMENDMENT

4 CSR 150-2.125 Continuing Medical Education. The board is proposing to amend sections (1)–(8), and (10) and (11).

PURPOSE: This amendment allows the board to implement a biennial renewal.

(1) **Effective February 1, 2002, [E]ach licensee[, on a yearly basis,]** shall complete and report at least *[twenty-five (25)]* **fifty (50)** hours of continuing medical education **each renewal period**. The board shall not issue a renewal of a licensee's certificate of registration unless the licensee demonstrates completion of *[twenty-five (25)]* **fifty (50)** hours of continuing medical education accredited by the American Osteopathic Association (AOA) as Category 1-A or 2-A, by the American Medical Association (AMA) as Category 1 or Category 2—as further specified in this rule, or American Academy of Family Practice Prescribed Credit, in the immediately preceding reporting period. A maximum of *[ten (10)]* **twenty (20)** hours of AMA Category 2 education for which documented credit is given may be counted towards the *[twenty-five (25)]* **fifty (50)**-hour requirement. A licensee is not required to complete any continuing medical education hours in the renewal *[year following the year]* **period** in which the licensee is initially licensed to practice the healing arts in Missouri if the licensee has not previously held a permanent license to practice the healing arts in Missouri or any other *[jurisdiction]* **state of the United States of America**. The period for completion of the continuing medical education requirements shall be the *[twelve (12)]* **twenty-four (24)**-month period beginning January 1 of each **even-numbered year** and ending December 31 of each **odd-numbered year**. A licensee who has failed to obtain and report, in a timely fashion, *[twenty-five (25)]* **fifty (50)** hours of continuing medical education shall not engage in the practice of medicine unless an extension is obtained pursuant to section (4) of this rule.

(A) A licensee shall be deemed to have complied with section (1) of this rule if the licensee completes forty (40) hours of continuing medical education and each course, seminar or activity includes a post-test of the material covered in the forty (40) continuing medical education hours. The forty (40) hours must all be accredited by the AOA as Category 1-A or by the AMA as Category 1.

(B) Of the fifty (50) required hours in section (1) or, alternatively, the forty (40) hours in subsection (1)(A), the licensee shall complete at least four (4) hours of accredited continuing medical education in the subject area of professionalism, medical ethics or risk management.

(2) Each licensee shall certify by signature, under penalty of perjury, that s/he has completed the required *[twenty-five (25)]* hours of continuing medical education listed by him/her on the renewal form (see 4 CSR 150-2.040).

(3) Each licensee shall retain records documenting his/her attendance at and completion of the required *[twenty-five (25)]* hours of continuing medical education for a minimum of three (3) years after the reporting period in which the continuing medical education was completed. The records shall document the titles of the courses taken, dates, locations, course sponsors, category of hours earned and number of hours earned. The board may conduct an audit of licensees to verify compliance with the continuing medical

education requirement. Licensees shall assist the board in its audit by providing timely and complete responses to the board's inquiries.

(4) A licensee who cannot complete the required *[twenty-five (25)]* hours of continuing medical education because of personal illness, military service or other circumstances beyond the licensee's control which the board deems to be sufficient to impose an insurmountable hardship may apply for an extension of time to complete the continuing medical education requirements. Any extension of time to complete the continuing medical education requirements will be granted solely in the discretion of the board. The licensee must make a written application for extension of time prior to the December 31 deadline for completion of the continuing medical education requirement. The application for extension shall be accompanied by a processing fee of *[fifteen dollars (\$15)]* **fifty dollars (\$50)**, together with the application for extension. The licensee shall provide full and complete written documentation of the grounds supporting the reasons for which an extension is sought. A licensee who requests an extension of time to complete the required *[twenty-five (25)]* hours of continuing medical education shall not engage in the active practice of the healing arts until the board grants the licensee's request for extension and the licensee receives express written authorization to do so.

(D) A licensee who is granted an extension of time shall complete the balance of his/her continuing medical education requirements no later than *[February 28]* **April 30** immediately following the end of the reporting period for which an extension was sought and shall provide the board with written documentation of his/her completion of the continuing medical education requirements no later than *[March 10]* **May 10** immediately following the end of the reporting period for which an extension was sought. Failure to complete the continuing medical education requirements by *[February 28]* **April 30** or to file the documentation with the board by *[March 10]* **May 10** shall constitute a violation of section 334.075, RSMo and this rule.

(E) An extension of time shall not be granted to any licensee who obtained an extension in the immediately preceding reporting *[year]* **period** in which the licensee held an active license, except in the case of a licensee who is unable to complete the requirements due to military service commitment pursuant to a combat or national emergency assignment.

(5) A licensee who has obtained American Specialty Board certification or recertification during the reporting *[year]* **period** shall be deemed to have obtained *[twenty-five (25)]* **the required** hours of continuing medical education. The licensee shall provide the board with documentation evidencing the certification or recertification upon request.

(6) A licensee who participated in an AMA- or AOA-approved internship or residency program during the reporting period shall be deemed to have obtained *[twenty-five (25)]* **the required** hours of continuing medical education if at least *[thirty (30)]* **sixty (60)** days of the reporting period were spent in the internship or residency.

(7) A licensee who participated in a fellowship program in an approved teaching institution shall be deemed to have obtained *[twenty-five (25)]* **the required** hours of continuing medical education if at least *[thirty (30)]* **sixty (60)** days of the reporting period were spent in the fellowship and the fellowship is determined to be advanced training. Upon request, the licensee shall provide documentation from the fellowship program director verifying the number of days in the program and that the program is advanced training.

(8) A licensee who holds a limited license to practice medicine in the state of Missouri shall obtain and report to the board *[five (5)/ten (10) hours of AMA Category 1 or AOA Category 1-A or 2-A continuing medical education each [calendar year] reporting period]*. The obtaining and reporting of these hours shall be done in accordance with this rule.

(10) To reinstate the license of a physician whose license has been in a noncurrent state for any reason, including retirement, for a period of two (2) years or less, that physician shall obtain, in addition to any other requirements of law, *[all the continuing medical education that physician would otherwise have been required to obtain if the physician's license had been current and active during that period]* **twenty-five (25) hours of continuing medical education for each calendar year in which the license was in a noncurrent state**. To reinstate the license of any physician whose license has been in a noncurrent state for any reason, including retirement, for more than two (2) years, that physician shall comply with 4 CSR 150-2.150 and any other requirements of law. No license of a physician whose license has been noncurrent shall be reinstated unless and until all required continuing medical education is obtained and reported to the board and all other requirements of law have been satisfied.

(11) Violation of any provision of this rule shall be deemed by the board to constitute misconduct, fraud, misrepresentation, dishonesty, unethical conduct or unprofessional conduct in the performance of the functions or duties of a physician depending on the licensee's conduct. In addition, a licensee who has failed to complete and report in a timely fashion the required *[twenty-five (25)]* hours of continuing medical education and engages in the active practice of the healing arts without the express written authority of the board shall be deemed to have engaged in the unauthorized practice of medicine.

AUTHORITY: sections 334.075[, RSMo 1994] and 334.125, RSMo [Supp. 1996] 2000. Original rule filed Oct. 16, 1991, effective March 9, 1992. For intervening history, please consult the Code of State Regulations. Amended: Filed April 13, 2001.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than \$500 in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than \$500 in the aggregate as the board is merely implementing a biennial renewal.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Missouri Board of Healing Arts, 3605 Missouri Boulevard, PO Box 4, Jefferson City, MO 65102. To be considered, comments must be received within thirty days after publication of this notice in the Missouri Register. No public hearing is scheduled.

Title 4—DEPARTMENT OF ECONOMIC DEVELOPMENT

Division 150—State Board of Registration for the Healing Arts

Chapter 2—Licensing of Physicians and Surgeons

PROPOSED RULE

4 CSR 150-2.165 Chelation of No Medical or Osteopathic Value

PURPOSE: This rule provides clarification of the approved use of ethylenediaminetetracetic acid (EDTA).

(1) Pursuant to authority granted to the board by section 334.100.2(4)(f), RSMo, the board declares the use of ethylenedi-

aminetetraacetic acid (EDTA) chelation on a patient is of no medical or osteopathic value except for those uses approved by the Food and Drug Administration (FDA) by federal regulation.

(2) The board shall not seek disciplinary action against a licensee based solely upon a non-approved use of EDTA chelation if the licensee has the patient sign the Informed Consent for EDTA Chelation Therapy form, included herein, before beginning the non-approved use of EDTA chelation on a patient.

INFORMED CONSENT FOR ETHYLENEDIAMINETETRACETIC ACID (EDTA) CHELATION THERAPY

PATIENT'S NAME: _____

ADDRESS: _____

AGE: _____

SEX: Male ☐Female ☐NAME AND ADDRESS OF TREATING PHYSICIAN

_____Malignancy, disease, illness or physical condition diagnosed for medical treatment by EDTA chelation therapy:

My physician has explained to me and I fully understand:

- (a) that the use of ethylenediaminetetracetic acid (EDTA) has been approved by the federal Food and Drug administration (FDA) only for the use of removing heavy metals from the body;
- (b) that the FDA has not approved the drug EDTA for treatment of diseases or conditions other than heavy metals poisoning;
- (c) that it has not been established through controlled trials that EDTA chelation therapy is effective for the treatment of circulatory diseases, specifically including atherosclerosis, hardening of the arteries, vascular insufficiency or diabetes;
- (d) that two controlled trials were completed in 1992 and 1994, respectively, which trials demonstrated that EDTA chelation therapy was not effective in the treatment of vascular diseases;
- (e) that the federal government and most insurance companies do not pay for or reimburse for treatment with EDTA chelation therapy;
- (f) that the Missouri State Board of Registration for the Healing Arts has monitored the development of the scientific literature on EDTA chelation therapy and has concluded that EDTA chelation therapy has been authoritatively demonstrated to be ineffective in the treatment of vascular diseases;
- (g) that the Missouri State Board of Registration for the Healing Arts has determined that the use of EDTA chelation therapy by Missouri citizens may be harmful to their health in that such patients may forego the use of medical treatments and drugs of proven usefulness in the treatment of vascular disease;
- (h) that neither the American Medical Association, the American Osteopathic Association, the American College of Cardiology, the American Heart Association nor any other recognized independent medical association recommends the use of EDTA chelation therapy for the treatment of any human disease, illness, malady or physical condition other than heavy metals poisoning;
- (i) that the Missouri State Board of Registration for the Healing Arts strongly recommends that Missouri citizens not undergo EDTA chelation therapy for the treatment of any human disease, illness, malady or physical condition other than heavy metals poisoning;
- (j) that therapy with EDTA chelation may not be begun until three working days have expired after the date of my execution of this informed consent form.

Physician_____
Date

I HAVE READ AND UNDERSTAND THE ABOVE. NOTWITHSTANDING HAVING READ AND UNDERSTOOD THE ABOVE, I HEREBY ELECT TO UNDERGO TREATMENT WITH EDTA CHELATION THERAPY UNDER THE PROTOCOL RECOMMENDED BY THE AMERICAN COLLEGE FOR THE ADVANCEMENT IN MEDICINE (ACAM).

Patient_____
Date

AUTHORITY: section 334.100.2(4)(f), RSMo 2000. Original rule filed April 13, 2001.

PUBLIC COST: This proposed rule will not cost state agencies or political subdivisions more than \$500 in the aggregate.

PRIVATE COST: This proposed rule will not cost private entities more than \$500 in the aggregate.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed rule with the Missouri Board of Healing Arts, 3605 Missouri Boulevard, PO Box 4, Jefferson City, MO 65102. To be considered, comments must be received within thirty days after publication of this notice in the Missouri Register. No public hearing is scheduled.

**Title 4—DEPARTMENT OF ECONOMIC
DEVELOPMENT
Division 150—State Board of Registration for the
Healing Arts
Chapter 8—Licensing of Clinical Perfusionists**

PROPOSED AMENDMENT

4 CSR 150-8.060 Fees. The board is proposing to amend section (1).

PURPOSE: This amendment reduces the annual renewal fee for perfusionists inasmuch as the Advisory Commission for Clinical Perfusionists has completed the initial licensing period for its licensees and established an operating fund.

(1) The following fees are established by the State Board of Registration for the Healing Arts:

(F) Renewal Fee **\$/250.00/ 125.00**

AUTHORITY: section 324.159, RSMo [Supp. 1997] 2000. Original rule filed Dec. 2, 1998, effective June 30, 1999. Amended: Filed April 13, 2001.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than \$500 in the aggregate.

PRIVATE COST: This proposed amendment is estimated to save private entities \$14,500 biennially for the life of the rule. It is anticipated that the total savings will recur each year for the life of the rule, however, may vary with inflation and is expected to decrease at the rate projected by the Legislative Oversight Committee. A detailed fiscal note, which estimates the cost of compliance with this rule, has been filed with the secretary of state.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Missouri Board of Healing Arts, 3605 Missouri Boulevard, PO Box 4, Jefferson City, MO 65102. To be considered, comments must be received within thirty days after publication of this notice in the Missouri Register. No public hearing is scheduled.

**FISCAL NOTE
PRIVATE ENTITY COST**

I. RULE NUMBER

Title: 4 - Department of Economic Development

Division: 150 - State Board of Registration for the Healing Arts

Chapter: 8 - Licensing of Clinical Perfusionists

Type of Rulemaking: Proposed Amendment

Rule Number and Name: 4 CSR 150-8.060 Fees

II. SUMMARY OF FISCAL IMPACT

Estimate of the number of entities by class which would likely be affected by the adoption of the proposed rule:	Classification by types of the business entities which would likely be affected:	Estimate Annual Cost of Compliance for the Life of the Rule:
116	Clinical Perfusionists (decrease of \$125.00 per renewal period)	\$14,500

Estimated Cost Savings for the
life of the rule:

\$14,500

III. WORKSHEET

Renewal Fee Decrease @ \$125.00

IV. ASSUMPTIONS

1. The board estimates that 116 currently licensed clinical perfusionists will apply for a renewal license each renewal period.
2. The private entity cost for this proposed rule is estimated to save private entities \$14,500 biennially for the life of the rule. It is anticipated that the total savings will for the life of the rule, however, may vary with inflation and is expected to decrease at the rate projected by the Legislative Oversight Committee.

**Title 4—DEPARTMENT OF ECONOMIC
DEVELOPMENT
Division 220—State Board of Pharmacy
Chapter 2—General Rules**

PROPOSED AMENDMENT

4 CSR 220-2.085 Electronic Transmission of Prescription Data.

The board is proposing to add new subsections (1)(D), (2)(C), (2)(D), and (2)(E) and renumber the remaining subsection accordingly.

PURPOSE: This amendment will provide a definition of the term "electronic signature" in order to allow pharmacists and pharmacies to utilize such technology in receiving and processing prescriptions.

(1) Definitions.

(D) **Electronic signature**—Means a confidential personalized digital key, code, number or other identifier used for secure electronic data transmissions which identifies and authenticates the signatory. Electronic signatures may be sent as part of an electronic transmission prescription to a pharmacy or it may be applied to a hard copy to be provided to the patient.

(2) When a prescription is transmitted to a pharmacy electronically, the following requirements must be met:

(B) To maintain the confidentiality of patient records, the system shall have adequate security and systems safeguards designed to prevent and detect unauthorized access, modification, or manipulation of patient records. Once the drug has been dispensed, any alterations in prescription drug order data shall be documented including the identification of the pharmacist responsible for the alteration; [and]

(C) **In verifying the authenticity of a transmitted prescription, the pharmacist shall ensure the validity of the prescription as to its source of origin. Measures to be considered in authenticating prescription drug orders received via electronic transmission include:**

1. Maintenance of a practitioner's facsimile number reference or other electronic signature file;

2. Verification of the telephone number of the originating facsimile equipment;

3. Telephone verification with the practitioner's office that the prescription as both written by the practitioner and transmitted by the practitioner or the practitioner's authorized agent;

4. Other efforts which, in the professional judgment of the pharmacist, may be necessary to ensure the transmission was initiated by the prescriber;

(D) **At the option of the patient, an electronically produced prescription may be sent to a pharmacy electronically or provided as a hard copy generated from the prescriber's electronic prescribing system;**

(E) **Hard copy prescriptions presented to the patient generated from electronic media shall be applied to paper that utilizes security features that will ensure that the prescription is not subject to any form of copying and/or alteration; and**

[(C)] (F) **Electronic transmission technology utilized by pharmacy personnel shall not be used to circumvent or violate any provision of state and federal drug laws or the Pharmacy Practice Act and accompanying regulations.**

AUTHORITY: sections 338.010, 338.095, 338.140], *RSMo Supp. 1999]* and 338.280, *RSMo [1994] 2000. Original rule filed Sept. 25, 1995, effective April 30, 1996. Amended: Filed July 28, 2000, effective Jan. 30, 2001. Amended: Filed April 6, 2001.*

PUBLIC COST: The proposed amendment will not cost state agencies or political subdivisions more than \$500 in the aggregate.

PRIVATE COST: The proposed amendment will not cost private entities more than \$500 in the aggregate.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the State Board of Pharmacy, Kevin Kinkade, Executive Director, PO Box 625, Jefferson City, MO 65102. To be considered, comments must be received within thirty days after publication of this notice in the *Missouri Register*. No public hearing is scheduled.

**Title 4—DEPARTMENT OF ECONOMIC
DEVELOPMENT
Division 220—State Board of Pharmacy
Chapter 5—Drug Distributor**

PROPOSED AMENDMENT

4 CSR 220-5.020 Drug Distributor Licensing Requirements.

The board is proposing to amend subparagraph (8)(A)1.B.

PURPOSE: This amendment provides a more precise definition of reasons for disciplinary action. This proposed amendment has been reviewed by the Drug Distributor Advisory Committee, as required by section 338.140.4, *RSMo*.

(8) The Board of Pharmacy may grant a temporary license to a wholesale or pharmacy drug distributor to allow for the conduct of business within the state until a determination by the board is made on the issuance of a permanent license.

(A) Temporary licenses shall remain valid until a time the board shall find that the applicant meets or fails to meet the requirements for regular licensure or one (1) year, whichever is less.

1. The board will consider, at a minimum, the following factors in reviewing the qualifications of persons who apply or renew as a drug distributor:

A. Any convictions of the applicant under any federal, state or local laws relating to drug samples, wholesale or retail drug distribution, or distribution of controlled substances;

B. [Any felony convictions of the applicant under federal, state or local laws] The person has been finally adjudicated and found guilty, or entered a plea of guilty or *nolo contendere*, in a criminal prosecution under the laws of any state or of the United States, for any offense reasonably related to the qualifications, functions or duties of any profession licensed or regulated under this chapter, for any offense an essential element of which is fraud, dishonesty or an act of violence, or for any offense involving moral turpitude, whether or not sentence is imposed;

C. The applicant's past experience in the manufacture or distribution of prescription drugs, including controlled substances;

D. The applicant furnishing false or fraudulent material in any application made in connection with drug manufacturing or distribution;

E. Suspension, revocation or probation by federal, state or local government of any license or registration currently or previously held by the applicant for the manufacture or distribution of any drugs, including controlled substances;

F. Compliance with licensing requirements under previously granted licenses, if any; and

G. Requirements to maintain or make available, or both, to the board or the federal, state or local law enforcement officials those records required under this section are followed.

2. If an applicant for a license in any way fails to provide information as requested by the board or does not cooperate with

requests and inquiries made by the board or provides false or misleading information to the board and the temporary license expires or is denied, all fees paid by the applicant shall be forfeited.

3. During the period of time that a temporary license is in effect, the applicant may conduct business in this state as a drug distributor as long as all state and federal laws governing drug distribution are followed and no action that results in professional misconduct as outlined in section 338.055, RSMo is documented.

4. If it is determined by the board that a permanent license is to be denied to an applicant, a denial notification letter shall be sent to the applicant. The temporary license will be considered invalid ten (10) days after notification is sent to the applicant by certified mail.

AUTHORITY: sections 338.330, 338.333, 338.335, 338.337, 338.340 and 338.350, [RSMo Supp. 1999] RSMo [1994] 2000. Original rule filed Feb. 4, 1991, effective June 10, 1991. Amended: Filed April 28, 1992, effective Feb. 26, 1993. Amended: Filed Jan. 27, 1995, effective Sept. 30, 1995. Amended: Filed March 15, 2000, effective Sept. 30, 2000. Amended: Filed Nov. 1, 2000. Amended: Filed April 6, 2001.

PUBLIC COST: The proposed amendment will not cost state agencies or political subdivisions more than \$500 in the aggregate.

PRIVATE COST: The proposed amendment will not cost private entities more than \$500 in the aggregate.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the State Board of Pharmacy, Kevin Kinkade, Executive Director, PO Box 625, Jefferson City, MO 65102. To be considered, comments must be received within thirty days after publication of this notice in the *Missouri Register*. No public hearing is scheduled.

Title 4—DEPARTMENT OF ECONOMIC DEVELOPMENT Division 245—Real Estate Appraisers Chapter 5—Fees

PROPOSED AMENDMENT

4 CSR 245-5.010 Payment. The board is proposing to amend sections (2) and (4).

PURPOSE: This amendment increases the minimum prorated fee to coincide with the fees established in 4 CSR 245-5.020 Application, Certificate and License Fees.

(2) Beginning January 1, 2000, all certificates and licenses will expire on June 30 of even-numbered years. The commission may prorate continuing education and fees in order to put all licensees on a biennial renewal. Initial certificates and licenses may be prorated on a quarterly *[bases/ basis]*. The prorated fee shall not be less than *[seventy-five dollars (\$75)] one hundred dollars (\$100)*. That proration shall not apply to expired certificates and license renewal. All renewal applications and fees must be delivered to the commission office or be postmarked prior to June 30 of even-numbered years.

(4) To renew a current, valid real estate appraiser certificate or license, *as of April 29, 1991,* the licensee shall file an application on a form approved by the commission and pay the prescribed renewal fee to the commission not earlier than one hundred twenty (120) days *[nor later than thirty (30) days]* prior to the expiration date of the certificate or license. Each application for renewal shall be accompanied by evidence in the form prescribed

by the commission of having completed the continuing education requirements for renewal specified in this rule.

AUTHORITY: sections 339.509 and 339.513, RSMo [Supp. 1998] 2000. Emergency rule filed Dec. 6, 1990, effective Dec. 16, 1990, expired April 14, 1991. Emergency rule filed April 4, 1991, effective April 14, 1991, expired Aug. 11, 1991. Original rule filed Jan. 3, 1991, effective April 29, 1991. For intervening history, please consult the *Code of State Regulations*. Amended: Filed April 13, 2001.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than \$500 in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than \$500 in the aggregate as the commission is implementing a biennial renewal for its licensees without changing the cost of renewal.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Missouri Real Estate Appraisers Commission, 3605 Missouri Boulevard, PO Box 1335, Jefferson City, MO 65102. To be considered, comments must be received within thirty days after publication of this notice in the *Missouri Register*. No public hearing is scheduled.

Title 4—DEPARTMENT OF ECONOMIC DEVELOPMENT Division 245—Real Estate Appraisers Chapter 5—Fees

PROPOSED AMENDMENT

4 CSR 245-5.020 Application, Certificate and License Fees. The board is proposing to amend section (2).

PURPOSE: The Missouri Real Estate Appraisers Commission is statutorily obligated to enforce and administer the provisions of Chapter 339, RSMo. Pursuant to sections 339.509 and 339.513, RSMo, the board shall by rule and regulation set the amount of fees authorized by Chapter 339, RSMo so that the revenue produced is sufficient, but not excessive, to cover the cost and expense to the board for administering the provisions of Chapter 339, RSMo. This proposed amendment is necessary because the board's fund balance and projected revenue will not support the expenditures necessary to enforce and administer the provisions of Chapter 339, RSMo, which will result in an endangerment to the health, welfare, and safety of the public.

(2) The following fees shall be paid for original issuance and renewal of certificates or licenses:

- | | |
|--|-----------------|
| (A) <i>[State-]</i> Initial Certified General Real Estate Appraiser Fee— | |
| Prior to July 1, 2002 | \$300.00 |
| Effective July 1, 2002 | \$400.00 |
| (B) <i>[State-]</i> Initial Certified Residential Real Estate Appraiser Fee— | |
| Prior to July 1, 2002 | \$300.00 |
| Effective July 1, 2002 | \$400.00 |
| (C) <i>[State-]</i> Initial Licensed Real Estate Appraiser Fee— | |
| Prior to July 1, 2002 | \$300.00 |
| Effective July 1, 2002 | \$400.00 |
| (D) <i>Nonresident State-Certified General Real Estate Appraiser Fee</i> | \$300.00 |
| (E) <i>Nonresident State-Certified Residential Real Estate Appraiser Fee</i> | \$300.00 |

<i>(F) Nonresident State-Licensed Real Estate Appraiser Fee</i>		<i>\$300.00/</i>
(D) Certified General Real Estate Appraiser		
Renewal Fee—		
Prior to April 1, 2002	\$300.00	
Effective April 1, 2002	\$400.00	
(E) Certified Residential Real Estate Appraiser		
Renewal Fee—		
Prior to April 1, 2002	\$300.00	
Effective April 1, 2002	\$400.00	
(F) Licensed Real Estate Appraiser Renewal Fee—		
Prior to April 1, 2002	\$300.00	
Effective April 1, 2002	\$400.00	

*AUTHORITY: sections 339.509, 339.513 and 339.525.5, RSMo [Supp. 1998] 2000. Emergency rule filed Dec. 6, 1990, effective Dec. 16, 1990, expired April 14, 1991. Emergency rule filed April 4, 1991, effective April 14, 1991, expired Aug. 11, 1991. Original rule filed Jan. 3, 1991, effective April 29, 1991. For intervening history, please consult the **Code of State Regulations**. Amended: Filed April 13, 2001.*

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than \$500 in the aggregate.

PRIVATE COST: This proposed amendment is estimated to cost private entities a total biennial increase of \$217,800 with a continuous biennial increase of \$32,000 for the life of the rule. It is anticipated that the total cost will recur biennially for the life of the rule, may vary with inflation and is expected to increase biennially at the rate projected by the Legislative Oversight Committee. A detailed fiscal note, which estimates the cost of compliance with this rule, has been filed with the secretary of state.

*NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Missouri Real Estate Appraisers Commission, 3605 Missouri Boulevard, PO Box 1335, Jefferson City, MO 65102. To be considered, comments must be received within thirty days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.*

FISCAL NOTE PRIVATE ENTITY COST

I. RULE NUMBER

Title: 4 – Department of Economic Development

Division: 245 – Real Estate Appraisers

Chapter: Chapter 5 – Fees

Type of Rulemaking: Proposed Amendment

Rule Number and Name: 4 CSR 245-5.020 Application, Certificate and License Fees

II. SUMMARY OF FISCAL IMPACT

Estimate of the number of entities by class which would likely be affected by the adoption of the proposed rule:	Classification by types of the business entities which would likely be affected:	Estimate biennial cost of compliance with the rule by the affected entities:
320	Certified Real Estate Appraisers, Certified Residential Real Estate Appraisers, and Licensed Real Estate Appraisers Biennially Applying for Initial Licensure (\$100.00 initial license fee increase)	\$32,000
1858	Currently licensed Certified Real Estate Appraisers, Certified Residential Real Estate Appraisers, and Licensed Real Estate Appraisers (\$100.00 renewal fee increase)	\$185,800

**Total biennial increase
for the life of the rule**

**\$217,800 biennially with
a continuous biennial
increase of \$32,000**

III. WORKSHEET

See above table

IV. ASSUMPTIONS

1. The number of entities used in this fiscal note are based on actual figures from FY00 and projected figures in FY01.

2. The commission anticipates that 320 applicants will apply for licensure biennially. Therefore, the commission estimates that private entities will incur a biennial increase of \$32,000 for the life of the rule as a result of the initial licensure fee increase.
3. Currently 1,858 certified real estate appraisers, certified residential real estate appraisers, and licensed real estate appraisers are certified/licensed by the commission. The commission anticipates an annual growth rate of 320 applicants biennially. Therefore, the commission estimates that private entities will incur an increase of \$185,800 biennially with a continuous biennial increase of \$32,000 for the life of the rule as a result of the renewal fee increase.
4. The commission estimates that private entities will incur a total biennial increase of \$217,800 with a continuous biennial increase of \$32,000 for the life of the rule.
5. It is anticipated that the total biennial cost will recur for the life, may vary with inflation and is expected to increase at the rate projected by the Legislative Oversight Committee.

**Title 4—DEPARTMENT OF ECONOMIC
DEVELOPMENT
Division 270—Missouri Veterinary Medical Board
Chapter 1—General Rules**

PROPOSED AMENDMENT

4 CSR 270-1.011 Organization of [Board/Duties] Veterinary Technician Committee. The board is proposing to amend the title and sections (1) and (2).

PURPOSE: This proposed amendment is to eliminate the different effective terms that were necessary when the Veterinary Technician Examining Committee was initially formed and clarifies that members of the Veterinary Technician Examining Committee shall have five (5) years of veterinary experience. This amendment also implements Senate Bill 424 of the 90th General Assembly, which made various changes to Chapter 340.

(1) The board [shall] **may** appoint a Veterinary Technician Examining Committee comprised of at least four (4) persons, one (1) of whom shall be the executive director, who will administer the veterinary technician examination and report the results with raw scores to the board within sixty (60) days of the examination. The committee shall consist of two (2) currently registered veterinary technicians, two (2) members of the Missouri Veterinary Medical Board and the executive director. The veterinary technicians shall have at least five (5) years' **veterinary** experience and not be associated in practice with an appointed member of the board.

(2) [Nothing shall prohibit the board from appointing the members of the Veterinary Technician Examining Committee currently serving on the effective date of these rules. Beginning with the committee appointed under these rules, one (1) member shall be appointed for four (4) years, one (1) member shall be appointed for three (3) years, one (1) member shall be appointed for two (2) years and one (1) member shall be appointed for one (1) year. After that, all] **All** members shall be appointed to serve four (4) years. The terms of the members of the Veterinary Medical Board serving on the committee shall coincide with their terms on the board. [The terms shall be effective March 1 of each year.]

AUTHORITY: sections 340.208 and 340.210 [and 340.308], RSMo [Supp. 1992] 2000. Original rule filed Nov. 4, 1992, effective July 8, 1993. Amended: Filed April 13, 2001.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than \$500 in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than \$500 in the aggregate.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Missouri Veterinary Medical Board, Dana Hoelscher, Executive Director, PO Box 633, Jefferson City, MO 65102. To be considered, comments must be received within thirty days after publication of this notice in the *Missouri Register*. No public hearing is scheduled.

**Title 4—DEPARTMENT OF ECONOMIC
DEVELOPMENT
Division 270—Missouri Veterinary Medical Board
Chapter 1—General Rules**

PROPOSED AMENDMENT

4 CSR 270-1.021 Fees. The board is proposing to amend subsections (1)(A), (1)(B) and (1)(C), and delete paragraphs (1)(A)3. and (1)(A)4. and subsection (1)(E).

PURPOSE: This amendment establishes provisional license fees and deletes photocopy fees from this rule to coincide with the provisions of section 610.026, which states fees for copying records shall not exceed the actual cost of document search and duplication. This amendment also implements Senate Bill 424 of the 90th General Assembly, which made various changes to Chapter 340.

(1) The following fees are established by the Missouri Veterinary Medical Board:

(A) Veterinarians—

1. Registration Fee	\$ 50.00
2. State Board Examination Fee	\$100.00
[3.] National Board Examination Fee	\$65.00
4. Clinical Competency Test Fee	\$ 140.00
[5.] 3. Reciprocity Fee	\$150.00
[6.] 4. Grade Transfer Fee	\$150.00
[7.] 5. [Restricted] Faculty License Fee	\$200.00
[8.] 6. Temporary or Provisional License Fee	\$100.00
A. Temporary or Provisional License Extension	\$ 50.00
[9.] 7. Annual Renewal Fee—	
A. Active	\$100.00
B. Inactive	\$ 50.00
C. [Restricted] Faculty	\$100.00
[10.] 8. Penalty Fee	\$100.00
[11.] 9. Name Change Fee	\$ 15.00
[12.] 10. Wall Hanging Replacement Fee	\$ 15.00

(B) Veterinary Technicians—

1. Registration Fee	\$ 50.00
2. State Board Examination Fee	\$ 30.00
3. National [Board] Examination Fee	\$100.00
4. Reciprocity Fee	\$ 50.00
5. Grade Transfer Fee	\$ 50.00
6. [Temporary] Provisional Registration Fee	\$ 50.00
7. Annual Renewal Fee—	
A. Active	\$ 20.00
B. Inactive	\$ 10.00
8. Penalty Fee	\$ 50.00
9. Name Change Fee	\$ 15.00
10. Wall Hanging Replacement Fee	\$ 15.00

(C) Facility Permit Fee—

1. Initial Fee	\$100.00
2. Annual Review Fee [Not to Exceed]	\$ [50.00] 25.00
3. Penalty Fee	\$ 50.00
(D) Certification of Professional Corporations Fee	\$ 25.00

[(E) Inspection and Copying of Documents—

1. Photocopy Fee (per page)	\$.25
2. Microfiche Reproduction Fee (per page)	\$.25
3. Microfilm Reproduction Fee (per page)	\$.25.]

AUTHORITY: sections 340.210 and 340.232, RSMo [Supp. 1997] 2000. Original rule filed Nov. 4, 1992, effective July 8, 1993. Amended: Filed April 14, 1994, effective Sept. 30, 1994. Amended: Filed March 10, 1995, effective Sept. 30, 1995. Amended: Filed Oct. 10, 1995, effective April 30, 1996. Amended: Filed Aug. 31, 1998, effective March 30, 1999. Amended: Filed April 13, 2001.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than \$500 in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than \$500 in the aggregate.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Missouri Veterinary Medical Board, Dana Hoelscher, Executive Director, PO Box 633, Jefferson City, MO 65102. To be considered, comments must be received within thirty days after publication of this notice in the Missouri Register. No public hearing is scheduled.

**Title 4—DEPARTMENT OF ECONOMIC
DEVELOPMENT
Division 270—Missouri Veterinary Medical Board
Chapter 1—General Rules**

PROPOSED RESCISSION

4 CSR 270-1.050 Renewal Procedures. This rule provided information to veterinarians and veterinary technicians licensed in Missouri regarding renewal of that license.

PURPOSE: The board is proposing to rescind this rule and readopt a new rule that more clearly outlines the procedures for renewal of a license.

AUTHORITY: sections 340.210, RSMo Supp. 1993, and 340.258, 340.260, 340.262, 340.312, 340.314, 340.316, 340.318, 340.320, 340.322, 340.324 and 340.326, RSMo Supp. 1992. Original rule filed Nov. 4, 1992, effective July 8, 1993. Amended: Filed April 14, 1994, effective Sept. 30, 1994. Rescinded: Filed April 13, 2001.

PUBLIC COST: This proposed rescission will not cost state agencies or political subdivisions more than \$500 in the aggregate.

PRIVATE COST: This proposed rescission will not cost private entities more than \$500 in the aggregate.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed rescission with the Missouri Veterinary Medical Board, Dana Hoelscher, Executive Director, PO Box 633, Jefferson City, MO 65102. To be considered, comments must be received within thirty days after publication of this notice in the Missouri Register. No public hearing is scheduled.

**Title 4—DEPARTMENT OF ECONOMIC
DEVELOPMENT
Division 270—Missouri Veterinary Medical Board
Chapter 1—General Rules**

PROPOSED RULE

4 CSR 270-1.050 Renewal Procedures

PURPOSE: This rule provides information to veterinarians licensed and veterinary technicians registered in Missouri regarding renewal of their license or certificate of registration.

(1) Definitions:

(A) "Inactive veterinarian or inactive veterinary technician" is defined as a currently licensed veterinarian or registered veterinary technician who has signed an affidavit that s/he is not practicing or involved in any aspect, administrative or otherwise, of veterinary medicine in Missouri as defined in section 340.200(24), RSMo;

(B) "License" shall include certificate of registration and the term "licensee" shall include registrant; and

(C) "Retired veterinarian or veterinary technician" is defined as a veterinarian or veterinary technician who has signed an affidavit

that s/he is not practicing or involved in any aspect, administrative or otherwise, of veterinary medicine as defined in section 340.200(24), RSMo.

(2) Renewal of an Active or Inactive License/Certificate of Registration.

(A) In order for a veterinarian to renew an active or inactive license, the licensee shall submit the following to the board office prior to the expiration date of the license:

1. A completed, signed, and notarized renewal application, which shall certify that the licensee has completed the required number of approved continuing education credits in accordance with 4 CSR 270-4.042; and

2. The appropriate renewal fee.

(B) In order for a veterinary technician to renew the active or inactive certificate of registration, the licensee shall submit the following to the board office prior to the expiration date of the registration:

1. A completed, signed, and notarized renewal application, which has been signed by the supervising veterinarian and certifies that the licensee has completed the required number of approved continuing education credits in accordance with 4 CSR 270-4.050; and

2. The appropriate renewal fee.

(C) If a veterinary technician is not employed under the supervision of a licensed veterinarian, his/her certificate of registration will be placed on an inactive status. An inactive veterinary technician shall sign an affidavit stating that s/he will not practice as a veterinary technician in Missouri and submit that affidavit with the renewal application and the appropriate fee to the board office.

(D) Failure to provide the requested information will result in the renewal application being returned to the licensee.

(E) Failure of a licensee to receive the notice and application to renew his/her license/registration shall not excuse him/her from the requirements of sections 340.258 or 340.314, RSMo to renew that license/certificate of registration.

(F) Failure to renew a license/registration, either active or inactive, within thirty (30) days of the license renewal date shall result in the license/certificate of registration being declared non-current as authorized by sections 340.258 and 340.314, RSMo.

(G) Any licensee who fails to renew his/her license/registration or whose license/certificate of registration has been declared non-current shall not perform or offer to perform any act for which a license is required.

(3) Restoration of a Non-Current License/Certificate of Registration.

(A) Any veterinarian whose license has been declared non-current under section 340.262, RSMo and who wishes to restore the license shall make application to the board by submitting the following within two (2) years of the license renewal date:

1. An application for renewal of licensure;

2. The current renewal fee and all delinquent renewal fees as set forth in 4 CSR 270-1.021;

3. The penalty fee as set forth in 4 CSR 270-1.021; and

4. Certification of completion of the required number of approved continuing education credits in accordance with 4 CSR 270-4.042.

(B) Any veterinary technician whose registration has been declared non-current under section 340.320.2, RSMo and who wishes to restore the certificate of registration shall make application to the board by submitting the following within one (1) year of the registration renewal date.

1. An application for renewal of registration;

2. The current renewal fee and all delinquent renewal fees as set forth in 4 CSR 270-1.021;

3. The penalty fee as set forth in 4 CSR 270-1.021;

4. Certification of completion of the required number of approved continuing education credits in accordance with 4 CSR 270-4.050; and

5. Verification of employment under the supervision of a licensed veterinarian.

(4) Inactive License/Certificate of Registration.

(A) A veterinarian or veterinary technician may choose to place his/her license/registration on an inactive status by signing an affidavit stating that s/he will not engage in the practice or be involved in any aspect, administrative or otherwise, of veterinary medicine in Missouri and submitting that affidavit with the renewal application and the appropriate fee to the board office. The license/certificate of registration issued to all these applicants shall be stamped "Inactive."

(B) In order for a veterinarian to activate an inactive license, the licensee shall submit to the board office:

1. The renewal application which shall certify that the licensee has completed the required continuing education credits in accordance with 4 CSR 270-4.042;

2. The balance of the active renewal fee; and

3. The license stamped "Inactive."

(C) In order for a veterinary technician to activate an inactive registration, the licensee shall submit to the board office:

1. The renewal application which shall certify that the licensee has completed the required continuing education credits in accordance with 4 CSR 270-4.050;

2. The balance of the active renewal fee;

3. The license stamped "Inactive"; and

4. Verification of current employment under the supervision of a licensed veterinarian.

(D) The board will issue an active license/certificate of registration, which shall be effective until the next regular renewal date. No penalty fee shall apply.

(5) Retired License/Certificate of Registration.

(A) A veterinarian or veterinary technician may place his/her license/registration on a retired status by signing an affidavit stating the date of retirement and submitting that affidavit with the renewal application to the board office. No fee is required and no certificate will be issued. The retired status will prevent the license/registration from being declared non-current pursuant to section 340.258.5, RSMo.

(B) If a retired veterinarian decides to again practice veterinary medicine, s/he must submit to the board office a completed renewal application which shall certify that the licensee has completed the required continuing education credits in accordance with 4 CSR 270-4.042 and the current renewal fee. The board will issue an active license which shall be effective until the next regular renewal date. No penalty fee shall apply. If it has been more than two (2) years since the retirement affidavit was submitted, evidence of ten (10) hours of continuing education for each year of retirement must be submitted with the renewal application. The board reserves the right pursuant to section 340.268, RSMo to direct any such applicant to take an examination(s) to reactivate his/her license.

(C) If a retired veterinary technician decides to again practice veterinary medicine, s/he shall submit to the board office a completed renewal application along with the current renewal fee. The renewal application shall verify current employment under the supervision of a licensed veterinarian and certify completion of the required number of approved continuing education credits in accordance with 4 CSR 270-4.050. The board will issue an active registration which shall be effective until the next regular renewal date. No penalty fee shall apply. The board reserves the right pursuant to section 340.268, RSMo to direct any such applicant to take an examination(s) to reactivate his/her registration.

(D) Any retired veterinarian or veterinary technician or any veterinarian or veterinary technician with an inactive license is not currently eligible to practice in Missouri and will be subject to disciplinary action under sections 340.264, 340.294 and 340.330, RSMo if s/he practices or offers to practice in Missouri.

AUTHORITY: sections 340.210, 340.258, 340.262, 340.312, 340.314, 340.320, 340.322, 340.324 and 340.326, RSMo 2000. Original rule filed Nov. 4, 1992, effective July 8, 1993. Amended: Filed April 14, 1994, effective Sept. 30, 1994. Rescinded and readopted: Filed April 13, 2001.

PUBLIC COST: This proposed rule will cost state agencies or political subdivisions an estimated \$24,360.13 annually for the life of the rule with a continuous annual increase cost of \$292.80. It is anticipated that these annual costs will recur for the life of the rule, may vary with inflation and is expected to increase annually at the rate projected by the Legislative Oversight Committee. A detailed fiscal note, which estimates the cost of compliance with this rule, has been filed with the secretary of state.

PRIVATE COST: This proposed rule will cost private entities an estimated \$248,510 annually with a continuous annual increase of \$2,000 for the life of the rule. It is anticipated that these annual costs will recur for the life of the rule, may vary with inflation and is expected to increase annually at the rate projected by the Legislative Oversight Committee. A detailed fiscal note, which estimates the cost of compliance with this rule, has been filed with the secretary of state.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed rule with the Missouri Veterinary Medical Board, Dana Hoelscher, Executive Director, PO Box 633, Jefferson City, MO 65102. To be considered, comments must be received within thirty days after publication of this notice in the Missouri Register. No public hearing is scheduled.

**FISCAL NOTE
PUBLIC ENTITY COST**

I. RULE NUMBER

Title: 4 - Department of Economic Development

Division: 270 – Missouri Veterinary Medical Board

Chapter: 2 – General Rules

Type of Rulemaking: Proposed Rule

Rule Number and Name: 4 CSR 270-1.050 Renewal Procedures

Prepared March 15, 2000 by the Division of Professional Registration and the Missouri Veterinary Medical Board

II. SUMMARY OF FISCAL IMPACT	
Affected Agency or Political Subdivision	Estimated Annual Cost of Compliance
Missouri Veterinary Medical Board (renewal of veterinary and veterinary technician licenses)	\$24,360.13

Total annual cost
for the life of the
rule **\$24,360.13 annually for the
life of the rule with a
continuous annual increased
cost of \$292.80.**

III. WORKSHEET

VETERINARY AND VETERINARY TECHNICIAN LICENSE RENEWAL COST

Veterinary and Veterinary Technician licenses are valid for 1 year. It is estimated that 2,206 Active Veterinarians, 484 Inactive Veterinarians, 338 Active Veterinary Technicians and 139 Inactive Veterinary Technicians will renew their licenses during the first year of implementation of the rule. Thereafter, the board anticipates an annual growth rate of 13 veterinarians and 35 veterinary technicians per year.

CLASSIFICATION	FEE AMOUNT	NUMBER IN CLASS	TOTAL ANNUAL COST
Renewal Application Printing Cost	\$.15	3167	\$475.05
Envelope for Mailing Renewal Application	\$.16	3167	\$506.72
Envelope for Mailing Renewal Application	\$.16	3167	\$506.72
Postage for Mailing Renewal Application	\$.33	3167	\$1,045.11
License Printing Cost	\$.11	3167	\$348.37
License Mailing Cost	\$.33	3167	\$1,045.11

Total: \$ 3,927.08

Renewal applications are processed by the division central processing unit. In FY02 the board transferred \$5,706.50 to the division for this service.

After the renewals are processed in the central processing unit, the applications are forwarded to the board for review by the Licensure Technician I who reviews the application and updates the information contained on the renewal to the licensing computer system. The Executive Director reviews any questions or problems on renewals and addresses those problems with necessary action such as correspondence, telephone calls or placing on the agenda for Board review. The Clerk IV will assist the Licensure Technician in any renewals containing problems with the employing facility and assist with high volume mail.

Staff resources are shared with another board. The figures below represent the personal service and expense and equipment costs paid by the Veterinary Medical Board for implementation of this rule.

						Total:	\$5,706.50
STAFF	ANNUAL SALARY	SALARY TO INCLUDE FRINGE BENEFITS	HOURLY SALARY	COST PER MINUTE	TIME PER APPLICATION	COST PER APPLICATION	TOTAL ANNUAL COST
Executive Director	\$43,038	\$56,272.19	\$27.05	.45	7 minutes	\$3.15	\$9,976.05
Clerk IV	\$23,436	\$30,642.57	\$14.73	.25	2 minutes	\$.50	\$1,583.50
Licensure Technician II	\$19,040	\$24,894.85	\$11.97	.20	5 minutes	\$1.00	\$3,167.00
						Total:	\$14,726.55

The board anticipates 3167 veterinarians and veterinary technicians will renew their licenses annually. Thereafter, the board anticipates an annual growth rate of 13 veterinarians and 35 veterinary technicians. The board estimates this process to cost the board approximately \$7.69 per application. Based on this assumption, the board estimates this renewal process will cost the board approximately \$24,360.13 for the first year of implementation of the rule with a continuous annual increased cost of \$292.80.

IV. ASSUMPTIONS

- Employee's salaries were calculated using their annual salary multiplied by 30.75% for fringe benefits and then were divided by 2080 hours per year to determine the hourly salary. The hourly salary was then divided by 60 minutes to determine the cost per minute. The cost per minute was then multiplied by the amount of time individual staff spent on the processing of applications or renewals. The total cost was based on the cost per application multiplied by the estimated number of applications or renewals.
- The total annual cost will recur each year for the life of the rule, may vary with inflation and are expected to increase annually at the rate projected by the Legislative Oversight Committee.

**FISCAL NOTE
PRIVATE ENTITY COST**

I. RULE NUMBER

Title: 4 – Economic Development

Division: 270 – Missouri Veterinary Medical Board

Chapter: 1 – General Rules

Type of Rulemaking: Proposed Amendment

Rule Number and Name: 4 CSR 270-1.050 Renewal Procedures

Prepared March 15, 2000 by the Division of Professional Registration and the Missouri Veterinary Medical Board

II. SUMMARY OF FISCAL IMPACT

Estimate of the number of entities by class which would likely be affected by the adoption of the proposed rule:	Classification by types of the business entities which would likely be affected:	Estimate annual cost of compliance with the rule by the affected entities:
2155	Veterinarians (Renewal of an Active License)	\$215,500
484	Veterinarians (Renewal of an Inactive License)	\$24,200
2	Veterinarians (Renewal of a Non-Current License)	\$400
1	Veterinarians (Renewal of a Retired License)	\$100
338	Veterinarian Technicians (Renewal of an Active License)	\$6,760
139	Veterinarian Technicians (Renewal of an Inactive License)	\$1,390
1	Veterinary Technician (Renewal of a Non-Current License)	\$140
2	Veterinarians (Renewal of a Retired License)	\$20

Estimate annual cost of compliance for the life of the rule.

\$248,510 annually with a continuous annual increase of \$2,000 for the life of the rule.

III. WORKSHEET

Veterinarians

- Annual Renewal Fee @ \$100
- Renewal of Inactive License @ \$50
- Renewal of Noncurrent License – Renewal Fee @ \$100 plus Penalty Fee @\$100
- Reactivation of a Retired License – Renewal Fee @ \$100

Veterinary Technicians

- Annual Registration Fee @ \$20
- Renewal of Inactive Registration Fee @ \$10
- Renewal of Noncurrent License – Renewal Fee @ \$20 plus Penalty Fee @\$50
- Reactivation of a Retired License – Renewal Fee \$20

IV. ASSUMPTIONS

Veterinarians –

The board anticipates:

- 2155 veterinarians will renew their active license annually and estimates an annual growth rate of 13 applicants per year for the life of the rule based FY98 and FY99 figures. Therefore, the board estimates that the private entity cost to comply with this rule will be \$215,500 annually with a continuous biennial increase of \$1,300 for the life of the rule.
- 484 veterinarians will renew their inactive license annually and estimates an annual growth rate of 15 applicants placing their license on an inactive status per year for the life of the rule based FY98 and FY99 figures. Therefore, the board estimates that the private entity cost to comply with this rule will be \$48,400 annually with a continuous biennial increase of \$1,500 for the life of the rule.
- 2 veterinarians will renew their non-current license each year. Therefore, the board estimates that that the private entity cost to comply with this provision will be \$400.
- 1 veterinarian will reactive their retired license each year. Therefore, the board estimates that that the private entity cost to comply with this provision will be \$100.

Veterinary Technicians –

The board anticipates:

- 338 veterinary technicians will renew their license annually and estimates an annual growth rate of 35 applicants per year for the life of the rule based FY98 and FY99 figures. Therefore, the board estimates that the private entity cost to comply with this rule will be \$6,760 annually with a continuous biennial increase of \$700 for the life of the rule.
- 139 veterinary technicians will renew their inactive license annually and estimates an annual growth rate of 15 applicants placing their license on an inactive status per year for the life of the rule based FY98 and FY99 figures. Therefore, the board estimates that the private entity cost to comply with this rule will be \$48,400 annually with a continuous biennial increase of \$1,500 for the life of the rule.
- 2 veterinary technicians will renew their non-current license each year. Therefore, the board estimates that that the private entity cost to comply with this provision will be \$140.
- 1 veterinary technician will reactive their retired license each year. Therefore, the board estimates that that the private entity cost to comply with this provision will be \$20.

It is anticipated that the total cost will recur annually for the life of the rule, may vary with inflation and is expected to increase annually at the rate projected by the Legislative Oversight Committee.

**Title 4—DEPARTMENT OF ECONOMIC
DEVELOPMENT**

**Division 270—Missouri Veterinary Medical Board
Chapter 2—Licensure Requirements for Veterinarians**

PROPOSED AMENDMENT

4 CSR 270-2.011 Educational Requirements. The board is proposing to amend sections (1) and (2).

PURPOSE: This proposed amendment changes the word "college" to "school" to accommodate all qualifying learning institutions. The board also clarified that should the Educational Commission of Foreign Veterinary Graduate (ECFVG) program no longer be administered by the American Veterinary Medical Association (AVMA) that the board would accept its successor program to qualify for licensure in Missouri. This amendment also implements Senate Bill 424 of the 90th General Assembly, which made various changes to Chapter 340.

(1) To meet the educational requirements for licensure to practice veterinary medicine in Missouri, an applicant must have received a doctor of veterinary medicine degree or its equivalent from a university or [college] school that is accredited by the American Veterinary Medical Association (AVMA).

(2) In the alternative, an applicant must have graduated from an AVMA-listed, nonaccredited university or [college] school of veterinary medicine located inside or outside the United States, its territories or Canada. This degree must be accompanied by proof satisfactory to the board that s/he has earned and currently holds an Educational Commission of Foreign Veterinary Graduate (ECFVG) certificate provided by the AVMA[,] or its successor.

AUTHORITY: sections 340.210, 340.228 and 340.230, RSMo [Supp. 1992] 2000. Original rule filed Nov. 4, 1992, effective July 8, 1993. Amended: Filed April 13, 2001.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than \$500 in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than \$500 in the aggregate.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Missouri Veterinary Medical Board, Dana Hoelscher, Executive Director, PO Box 633, Jefferson City, MO 65102. To be considered, comments must be received within thirty days after publication of this notice in the Missouri Register. No public hearing is scheduled.

**Title 4—DEPARTMENT OF ECONOMIC
DEVELOPMENT**

**Division 270—Missouri Veterinary Medical Board
Chapter 2—Licensure Requirements for Veterinarians**

PROPOSED AMENDMENT

4 CSR 270-2.021 Internship or Veterinary Candidacy Program. The board is proposing to amend the title of the rule and sections (1)–(7) in addition to deleting the form that immediately follows this rule in the Code of State Regulations.

PURPOSE: This proposed amendment allows an applicant to serve a veterinary candidacy program and decreases the amount of time for the postgraduate internship or veterinary candidacy program.

This amendment also implements Senate Bill 424 of the 90th General Assembly, which made various changes to Chapter 340.

(1) All applicants for licensure by examination shall complete a [three (3)] two (2)-month postgraduate internship or veterinary candidacy program under the supervision of a licensed veterinarian in good standing. To be in good standing the veterinarian's license(s) must be current and unencumbered. The postgraduate internship or veterinary candidacy program may be completed in any state, territory or district of the United States or Canada.

(2) The supervising veterinarian shall submit an evaluation form stating that the applicant has satisfactorily completed the internship or veterinary candidacy program. The form is available upon request from the executive director, Missouri Veterinary Medical Board, P/.JO/. Box 633, Jefferson City, MO 65102.

(3) The purpose of the internship or veterinary candidacy program is to provide the applicant with at least [three hundred sixty (360)] three hundred twenty (320) hours of work experience in veterinary medicine under supervision prior to licensure. This practice shall include, at a minimum, diagnosis, treatment, surgery and practice management.

(4) An applicant may complete the internship or veterinary candidacy program under a [temporary] provisional license at any time after graduation. S/he may take the examinations for licensure prior to the internship or veterinary candidacy program.

(5) Completion of a student preceptor program which is recognized and approved by the board prior to graduation may be substituted for the internship or veterinary candidacy program. The board shall have the sole discretion as to whether or not the preceptor program will qualify in lieu of the internship or veterinary candidacy program. This program shall be defined by the curriculum of the veterinary [college] school or university and must include a minimum of [three (3)] two (2) months during which time the student has at least [three hundred sixty (360)] three hundred twenty (320) hours of work experience in the following areas: diagnosis, treatment, surgery and practice management. The student preceptor program may not begin before the start of the student's third year and must be completed prior to the date of graduation.

(6) Any [college] school or university that wishes to submit a student preceptorship program for board approval shall send a photocopy of the description of the program from the veterinary school's curriculum to the board office.

(7) For a student preceptorship to qualify in lieu of an internship or a veterinary candidacy program, an evaluation form must be submitted to the board office. The form is available upon request from the executive director, Missouri Veterinary Medical Board, P/.JO/. Box 633, Jefferson City, MO 65102.

AUTHORITY: sections 340.200, 340.210 and [340.244] 340.246, RSMo [Supp. 1992] 2000. Original rule filed Nov. 4, 1992, effective June 1, 1994. Amended: Filed July 23, 1993, effective March 10, 1994. Amended: Filed April 13, 2001.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than \$500 in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than \$500 in the aggregate.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the

Missouri Veterinary Medical Board, Dana Hoelscher, Executive Director, PO Box 633, Jefferson City, MO 65102. To be considered, comments must be received within thirty days after publication of this notice in the Missouri Register. No public hearing is scheduled.

Title 4—DEPARTMENT OF ECONOMIC DEVELOPMENT

Division 270—Missouri Veterinary Medical Board Chapter 2—Licensure Requirements for Veterinarians

PROPOSED AMENDMENT

4 CSR 270-2.052 [Restricted] Faculty Licensure. The board is proposing to amend sections (1)–(3), and (7) and (8) and delete the form following this rule in the *Code of State Regulations*.

PURPOSE: This proposed amendment eliminates the requirement for faculty at the University of Missouri College of Veterinary Medicine to take the National Board Examination and the Clinical Competency Test in order to be issued a faculty license. This amendment also implements Senate Bill 424 of the 90th General Assembly, which made various changes to Chapter 340.

(1) *[Faculty members of the University of Missouri, College of Veterinary Medicine excluding interns may apply for a restricted license to practice veterinary medicine by submitting a completed application and verification of his/her employment as a member of the faculty of the University of Missouri, College of Veterinary Medicine.]* The board may issue a veterinary faculty license to any qualified applicant associated with the University of Missouri-Columbia, College of Veterinary Medicine, and involved in the instructional program of either undergraduate or graduate veterinary medical students. In order to qualify for a faculty license, the applicant must:

(A) Demonstrate ability to communicate in and understand written and spoken English; and

(B) Have been actively engaged in the practice of veterinary medicine for at least five (5) consecutive years immediately prior to making application in Missouri. “Actively engaged,” shall mean that the applicant worked a minimum of twenty (20) hours per week in a clinical setting; or

(C) Have completed an internship at an American Veterinary Medical Association (AVMA) accredited veterinary school.

(2) All applicants for this *[restricted]* faculty license shall *[have taken and passed each of the following examinations within three (3) attempts]*:

(A) *[The State Board Examination]* Provide for the board a transcript or diploma demonstrating graduation from a reputable veterinary program;

(B) *[The National Board Examination (NBE)]* Schedule an appearance before the board prior to the issuance of a license; and

(C) *[The Clinical Competency Test.]* Take and pass the State Board Examination.

(3) *[All applicants for this restricted faculty license shall demonstrate ability to communicate in and understand written and spoken English.]* A faculty license does not meet the requirements of licensure for federal accreditation with the United States Department of Agriculture (USDA) or deputyship with the Missouri Department of Agriculture.

(7) All licenses issued under this rule shall have the word *“Restricted”* **“Faculty”** on them.

(8) *[Restricted f]* Faculty licenses shall be renewed annually by submitting the renewal application and fee.

AUTHORITY: sections 340.210[, 340.216] and [340.240(3)] 340.247, RSMo [1994] 2000. Original rule filed Oct. 10, 1995, effective April 30, 1996. Amended: Filed April 13, 2001.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than \$500 in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than \$500 in the aggregate.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Missouri Veterinary Medical Board, Dana Hoelscher, Executive Director, PO Box 633, Jefferson City, MO 65102. To be considered, comments must be received within thirty days after publication of this notice in the Missouri Register. No public hearing is scheduled.

Title 4—DEPARTMENT OF ECONOMIC DEVELOPMENT

Division 270—Missouri Veterinary Medical Board Chapter 2—Licensure Requirements for Veterinarians

PROPOSED AMENDMENT

4 CSR 270-2.070 [Temporary] Provisional Licenses. The board is proposing to amend the title of the rule and sections (1)–(4), delete sections (5)–(8), add new language in the newly numbered sections (5) and (6) and delete the forms immediately following this rule in the *Code of State Regulations*.

PURPOSE: This amendment provides for the issuance of a provisional license in Missouri. This amendment also implements Senate Bill 424 of the 90th General Assembly, which made various changes to Chapter 340.

(1) A *[temporary]* **provisional** license may be issued pursuant to section 340.246, RSMo to a qualified applicant for licensure pending examination results and completion of the internship **or veterinary candidacy** program, if the applicant meets the requirements for licensure and provided that the applicant is working under the supervision of a licensed veterinarian in good standing. The applicant must submit the following:

(A) An application for both permanent and *[temporary]* **provisional** licensure provided by the board;

(B) All nonrefundable license fees; and

(C) A statement signed by a licensed veterinarian in good standing that the applicant shall be working under the supervision of that veterinarian. **To be in good standing the veterinarian's license(s) must be current and unencumbered.** This supervision shall be consistent with the delegated animal health care task.

(2) A *[temporary]* **provisional** license issued based on section (1) shall expire in one (1) year or sooner if the applicant becomes permanently licensed. A *[temporary]* **provisional** license cannot be renewed.

(3) The *[temporary]* **provisional** license will be sent to the supervisor.

(4) The supervisor identified on the *[temporary]* **provisional** license application is responsible for the *[temporary]* **provisional**

licensee and shall notify the board within ten (10) days if the employment ceases at the place of employment designated on the [temporary] provisional license.

[(5) Pursuant to 340.248, RSMo, a temporary license may be issued to a licensed veterinarian of another state who is not under discipline or investigation by that state, for the exclusive purpose of providing veterinary medical services for a specific animal owner in Missouri. The applicant shall submit the following:

- (A) An application provided by the board which must clearly identify the name of the specific animal owner; and*
- (B) The nonrefundable temporary license fee.*

(6) A temporary license issued based on section (5) shall expire in one hundred twenty (120) days. Upon request, it may be renewed one time for an additional ninety (90) days upon approval by the board and payment of the required fee.

(7) Only one (1) temporary license may be issued to any person at the same time.

(8) Temporary licensees are subject to the requirements of Chapter 340, RSMo and these rules.]

(5) Only one (1) provisional license may be issued to any person at the same time.

(6) Provisional licensees are subject to the requirements of Chapter 340, RSMo and these rules.

AUTHORITY: sections 340.210, 340.246[, 340.248] and 340.250, RSMo [Supp. 1992] 2000. Original rule filed Nov. 4, 1992, effective July 8, 1993. Amended: Filed April 13, 2001.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than \$500 in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than \$500 in the aggregate.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Missouri Veterinary Medical Board, Dana Hoelscher, Executive Director, PO Box 633, Jefferson City, MO 65102. To be considered, comments must be received within thirty days after publication of this notice in the Missouri Register. No public hearing is scheduled.

Title 4—DEPARTMENT OF ECONOMIC DEVELOPMENT

Division 270—Missouri Veterinary Medical Board Chapter 2—Licensure Requirements for Veterinarians

PROPOSED RULE

4 CSR 270-2.071 Temporary Licenses

PURPOSE: This rule provides the procedures and requirements for obtaining a temporary license in Missouri. This rule also implements Senate Bill 424 of the 90th General Assembly, which made various changes to Chapter 340.

(1) Pursuant to section 340.248, RSMo, a temporary license may be issued to a licensed veterinarian of another state who is not under discipline or investigation by that state, for the exclusive

purpose of providing veterinary medical services for a specific animal owner in Missouri. The applicant shall submit the following:

- (A) An application provided by the board which must clearly identify the name of the specific animal owner; and
- (B) The nonrefundable temporary license fee.

(2) A temporary license issued based on section (1) shall expire in one hundred twenty (120) days. Upon request, it may be renewed one time for an additional ninety (90) days upon approval by the board and payment of the required fee.

(3) Only one temporary license may be issued to any person at the same time.

(4) Temporary licensees are subject to the requirements of Chapter 340, RSMo and these rules.

AUTHORITY: sections 340.210, 340.248 and 340.250, RSMo 2000. Original rule filed April 13, 2001.

PUBLIC COST: This proposed rule will not cost state agencies or political subdivisions more than \$500 in the aggregate.

PRIVATE COST: This proposed rule will not cost private entities more than \$500 in the aggregate.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed rule with the Missouri Veterinary Medical Board, Dana Hoelscher, Executive Director, PO Box 633, Jefferson City, MO 65102. To be considered, comments must be received within thirty days after publication of this notice in the Missouri Register. No public hearing is scheduled.

Title 4—DEPARTMENT OF ECONOMIC DEVELOPMENT

Division 270—Missouri Veterinary Medical Board Chapter 3—Registration Requirements for Veterinary Technicians

PROPOSED AMENDMENT

4 CSR 270-3.020 Examinations. The board is proposing to amend sections (1)–(3) and (6).

PURPOSE: This proposed amendment specifies the correct name of the Veterinary Technician National Examination and allows an applicant the opportunity to take the examination four times instead of three. This amendment also implements Senate Bill 424 of the 90th General Assembly, which made various changes to Chapter 340.

(1) All applicants for registration as a veterinary technician in Missouri shall take the **Veterinary Technician National [Board/ Examination [(NBE)] (VTNE)** and the State Board Examination. The deadline for applying to take the examination(s) shall be sixty (60) days prior to the scheduled administration of the examinations.

(2) The passing score on the *[(NBE)] VTNE* shall be the minimum criterion referenced score of four hundred twenty-five (425). The passing score shall be seventy percent (70%) correct on the State Board Examination for the issuance of a registration in this state.

(3) The *[(NBE)] VTNE* and the State Board Examination shall be administered at least once each year.

(6) Effective *[August 28, 1992]* **August 28, 1999**, no person may take either examination more than *[three (3)]* **four (4)** times either in or out of Missouri to qualify for registration in Missouri. **Prior to making application for the fourth attempt at passage of an examination, the applicant shall schedule an appearance with the board to outline a continuing education program, which shall be board approved and completed prior to filing application for the subsequent examination.**

AUTHORITY: sections 340.210, 340.300, 340.302 and 340.308, RSMo [1994] 2000. Original rule filed Nov. 4, 1992, effective July 8, 1993. Amended: Filed April 14, 1994, effective Sept. 30, 1994. Amended: Filed March 10, 1995, effective Sept. 30, 1995. Amended: Filed April 13, 2001.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than \$500 in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than \$500 in the aggregate.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Missouri Veterinary Medical Board, Dana Hoelscher, Executive Director, PO Box 633, Jefferson City, MO 65102. To be considered, comments must be received within thirty days after publication of this notice in the Missouri Register. No public hearing is scheduled.

Title 4—DEPARTMENT OF ECONOMIC DEVELOPMENT

Division 270—Missouri Veterinary Medical Board Chapter 3—Registration Requirements for Veterinary Technicians

PROPOSED AMENDMENT

4 CSR 270-3.030 Reciprocity. The board is proposing to amend section (1), delete section (2), renumber the remaining sections accordingly, and amend the newly renumbered sections (3) and (4).

PURPOSE: This proposed amendment clarifies that the board will consider applications for reciprocity from another state, territory, district or province of the United States or Canada. This proposed amendment also clarifies the name of the Veterinary Technicians National Examination. This amendment also implements Senate Bill 424 of the 90th General Assembly, which made various changes to Chapter 340.

(1) To be registered by reciprocity, an applicant shall—

(A) *[h]* Have been employed as a registered veterinary technician and supervised by a licensed veterinarian for at least five (5) consecutive years preceding his/her application to practice in Missouri *./.*; and

(B) Be currently registered in another state, territory, district or province of the United States or Canada having standards for admission substantially the same as the standards in Missouri, and that the standards were in effect at the time the applicant was first admitted to practice in the other state, territory, district or province of the United States or Canada.

[(2) The other state in which the applicant is registered must have standards for admission to practice which are equal to, or more stringent than, current admission standards in Missouri and those standards must have been in effect when the applicant was originally registered.]

[(3)] (2) The applicant shall—

(A) Complete an application form provided by the board which shall include a complete employment history;

(B) Submit the nonrefundable reciprocity fee and registration fee;

(C) Request the licensing authority in each state in which the applicant has ever been registered to submit a Verification Request Form *[(see 4 CSR 270-2.060)]* which is available from the board office; and

(D) Request the national testing service to send evidence that the applicant has taken the **Veterinary Technician National [Board] Examination [(NBE)] (VTNE)** and received a passing score as defined in 4 CSR 270-3.020.

[(4)] (3) Following the review process, the applicant will be informed by letter that registration by reciprocity has been approved or denied. The denial letter will identify the reason(s) for denial and the appeal process.

[(5)] (4) If an applicant does not qualify for registration by reciprocity because the other state's requirements are not substantially equal to Missouri's, s/he may request the board to transfer his/her *[NBE]* VTNE score. The applicant shall provide satisfactory proof that the exam was taken within five (5) years of the date of the application and that s/he completed the *[NBE]* VTNE with a score at least equal to the passing score required for registration in Missouri.

[(6)] (5) Grade score transfer applicants will be required to take the Missouri State Board Examination.

AUTHORITY: sections 340.210, 340.234, 340.238, and 340.306, RSMo [1994] 2000. Original rule filed Nov. 4, 1992, effective July 8, 1993. Amended: Filed March 10, 1995, effective Sept. 30, 1995. Amended: Filed April 13, 2001.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than \$500 in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than \$500 in the aggregate.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Missouri Veterinary Medical Board, Dana Hoelscher, Executive Director, PO Box 633, Jefferson City, MO 65102. To be considered, comments must be received within thirty days after publication of this notice in the Missouri Register. No public hearing is scheduled.

Title 4—DEPARTMENT OF ECONOMIC DEVELOPMENT

Division 270—Missouri Veterinary Medical Board Chapter 3—Registration Requirements for Veterinary Technicians

PROPOSED AMENDMENT

4 CSR 270-3.040 Temporary Registration for Veterinary Technicians. The board is proposing to amend subsection (1)(C).

PURPOSE: This proposed amendment requires the supervising veterinarian to have a license that is current, unencumbered and in good standing and implements Senate Bill 424 of the 90th General Assembly, which made various changes to Chapter 340.

(1) A temporary registration may be issued to a qualified applicant for registration pending examination results if the applicant meets

the requirements for registration and provided that the applicant is working under the supervision of a licensed veterinarian in good standing. The applicant shall submit the following:

(C) A statement signed by a licensed veterinarian in good standing that the applicant shall be working under the supervision of that veterinarian. **To be in good standing the veterinarian's license(s) must be current and unencumbered.** This supervision shall be consistent with the delegated animal health care task.

AUTHORITY: sections 340.210, 340.246 and 340.298, RSMo [Supp. 1993] 2000. Original rule filed Nov. 4, 1992, effective July 8, 1993. Amended: Filed April 13, 2001.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than \$500 in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than \$500 in the aggregate.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Missouri Veterinary Medical Board, Dana Hoelscher, Executive Director, PO Box 633, Jefferson City, MO 65102. To be considered, comments must be received within thirty days after publication of this notice in the Missouri Register. No public hearing is scheduled.

**Title 4—DEPARTMENT OF ECONOMIC
DEVELOPMENT
Division 270—Missouri Veterinary Medical Board
Chapter 4—Minimum Standards**

PROPOSED RULE

4 CSR 270-4.042 Minimum Standards for Continuing Education for Veterinarians

PURPOSE: This rule defines the minimum standards for continuing education for veterinarians. In August, 1999 Senate Bill 424 became effective which revised Chapter 340.

(1) Pursuant to 340.258, RSMo, all licensees shall provide satisfactory evidence of having completed at least ten (10) hours of continuing education each year that is relevant to the practice of veterinary medicine and in accordance with this rule in order to renew their licenses.

(2) The continuing education reporting period shall begin each year on December 1 and end November 30 of the following year. Continuing education hours earned after November 30 shall apply to the next reporting cycle. A renewal license will not be issued until all renewal requirements have been met.

(3) For the license renewal due on November 30, 2002, and each subsequent renewal thereafter, the licensee shall certify that he/she has obtained at least ten (10) hours of continuing education during the year preceding the license renewal on the renewal form provided by the board. The renewal form shall be mailed directly to the board office prior to November 30 of each year. The licensee shall not submit the record of continuing education attendance to the board except in the case of a board audit.

(4) Every licensee shall maintain full and complete records of all approved continuing education hours earned for the two (2) previous reporting periods in addition to the current reporting period. The records shall document the titles of the courses taken, dates, locations, course sponsors, number of hours earned and certificate of attendance or completion. The board may conduct an audit of

licensees to verify compliance with the continuing education requirements. Licensees shall assist the board in its audits by providing timely and complete responses to the board's inquiries.

(5) Violation of any provision of this rule shall be grounds for discipline in accordance with section 340.264, RSMo.

(6) A continuing education hour includes but is not limited to:

(A) Fifty (50) minutes of attendance at an approved workshop or seminar;

(B) Fifty (50) minutes of reading an approved scientific journal;

(C) Twenty-five (25) minutes of presentation in an approved workshop or seminar. No credit shall be granted for any subsequent presentations on the same subject matter during the same renewal period;

(D) Completion of academic course work in veterinary medicine at an accredited college of veterinary medicine with one (1) credit hour equaling ten (10) continuing education hours.

(7) The required ten (10) hours may be satisfied through any combination of the following education activities:

(A) Attendance or presentation at scientific workshops or seminars approved by this board;

(B) Completion of audio or video recordings, electronic, computer or interactive materials or programs on scientific subjects prepared or sponsored by any of the organizations defined in section (8) below. The licensee must obtain written certification of course completion from the sponsor;

(C) A maximum of two (2) hours of self-study reading approved scientific journals;

(D) A maximum of four (4) hours attendance in an approved workshop or seminar on non-scientific subjects relating to the practice of veterinary medicine such as communication skills, medical record keeping, stress management or practice management;

(E) A maximum of four (4) hours of audio or video recordings, electronic, computer or interactive materials or programs on non-scientific subjects, as set forth in subsection (7)(D) above, and prepared or sponsored by any of the organizations defined in section (8) below. The licensee must obtain written certification of course completion from the sponsor; or

(F) Study in a graduate resident program at an American Veterinary Medical Association approved veterinary school will satisfy the continuing education requirements for the year in which the veterinarian is enrolled in such program.

(8) Workshops, seminars and prepared materials on scientific and non-scientific subjects relating to veterinary medicine approved by or sponsored by the following organizations are approved:

(A) American Veterinary Medical Association;

(B) Specialty groups of the American Veterinary Medical Association;

(C) Regional meetings such as Central Veterinary Conference and Western Veterinary Conference;

(D) Any state or province veterinary medical association;

(E) Any local or regional veterinary medical association;

(F) The American Animal Hospital Association;

(G) American veterinary schools accredited by the American Veterinary Medical Association;

(H) Any state veterinary academy;

(I) American Association of Veterinary State Boards (AAVSB) or its successor—Registry of Approved Continuing Education (RACE); and

(J) Other programs receiving prior approval from this board.

(9) With the exception of any of the previously mentioned educational organizations, any other regularly organized group of veterinarians that wants to sponsor an educational program to meet

the standards for license renewal in Missouri shall submit two (2) copies of the program schedule and outline to the board's executive director not fewer than sixty (60) days prior to the date of the program. The outline must include the program's subject matter, the number of hours required for its presentation and the identity and qualifications of the speakers and instructors. The board shall review the schedule and outline to determine if approval will be granted. The board will not consider requests for approval of any program submitted after it has already been presented.

(10) The following scientific journals are approved by the board:

- (A) *Journal of the American Veterinary Medical Association*;
- (B) *The Journal of Veterinary Research*;
- (C) *Veterinary Medicine*;
- (D) Publications of the American Veterinary Medical Association Approved Constituent Specialty Groups;
- (E) Compendium of continuing education;
- (F) *Journal of American Animal Hospital Association*;
- (G) Other publications approved in advance by the board.

(11) Any licensee seeking renewal of a license or certificate without having fully complied with these continuing education requirements who wishes to seek a waiver of the requirements shall file with the board a renewal application, a statement setting forth the facts concerning the noncompliance, a request for waiver of the continuing education requirements on the basis of such facts and, if desired, a request for an interview before the board. If the board finds from the statement or any other evidence submitted, that good cause has been shown for waiving the continuing education requirements, or any part thereof, the board shall waive part or all of the requirements for the renewal period for which the licensee has applied. At that time, the licensee will be requested to submit the required renewal fee.

(A) Good cause shall be defined as an inability to devote sufficient hours to fulfilling the continuing education requirements during the applicable renewal period based on one of the following reasons:

1. Full-time service in the armed forces of the United States during a substantial part of the renewal period; or
2. An incapacitating illness; or
3. Undue hardship.

(B) If an interview before the board is requested at the time the request for waiver is filed, the licensee shall be given at least twenty (20) days written notice of the date, time and place of the interview.

(12) Continuing education credit hours used to satisfy the continuing education requirements of another state may be submitted to fulfill the requirements of this state if the other state's continuing education requirements are substantially equal to or greater than the requirements of this state.

(13) A licensee who completes more than ten (10) continuing education hours, excluding self-study, during the current reporting period may receive credit for the excess hours, not to exceed ten (10), in the next succeeding reporting period. Continuing education hours cannot be carried over more than one continuing education reporting period after being earned.

(14) Any licensee who seeks to renew an inactive, retired or non-current license shall submit proper evidence that s/he has obtained at least ten (10) continuing education hours for each year that his/her license was inactive, retired or non-current. The required hours must have been obtained within three (3) years prior to renewal.

PUBLIC COST: *This proposed rule will cost the Missouri Veterinary Medical Board \$13,618.46 annually for the life of the rule. It is anticipated that the total cost will recur annually for the life of the rule, may vary with inflation and is expected to increase annually at the rate projected by the Legislative Oversight Committee. A detailed fiscal note, which estimates the cost of compliance with this rule, has been filed with the secretary of state.*

PRIVATE COST: *This proposed rule is estimated to cost private entities \$215,500 annually with a continuous biennial increase of \$1,300 for the life of the rule. It is anticipated that these annual costs will recur for the life of the rule, may vary with inflation and is expected to increase annually at the rate projected by the Legislative Oversight Committee. A detailed fiscal note, which estimates the cost of compliance with this rule, has been filed with the secretary of state.*

NOTICE TO SUBMIT COMMENTS: *Anyone may file a statement in support of or in opposition to this proposed rule with the Missouri Veterinary Medical Board, Dana Hoelscher, Executive Director, PO Box 633, Jefferson City, MO 65102. To be considered, comments must be received within thirty days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.*

AUTHORITY: *sections 340.210, 340.258 and 340.268, RSMo 2000. Original rule filed April 13, 2001.*

**FISCAL NOTE
PUBLIC ENTITY COST**

I. RULE NUMBER

Title: 4 - Department of Economic Development

Division: 270 - Missouri Veterinary Medical Board

Chapter: 4 - Minimum Standards

Type of Rulemaking: Proposed Rule

Rule Number and Name: 4 CSR 270-4.042 Minimum Standards for Continuing Education for Veterinarians

Prepared March 15, 2000 by the Division of Professional Registration and the Missouri Veterinary Medical Board

II. SUMMARY OF FISCAL IMPACT	
Affected Agency or Political Subdivision	Estimated Annual Cost of Compliance
Missouri Veterinary Medical Board (review of programs submitted by sponsoring organization)	\$654.24
Missouri Veterinary Medical Board (review of continuing education certificates)	\$12,964.22
Total annual cost for the life of the rule	
\$13,618.46	

III. WORKSHEET

REVIEW OF CONTINUING EDUCATION PROGRAMS SUBMITTED BY SPONSORING ORGANIZATIONS FOR BOARD APPROVAL

Organizations not listed in the rule as automatically approved must submit their copies of the program to the board for approval at least sixty days prior to the date of the program.

CLASSIFICATION	FEE AMOUNT	NUMBER IN CLASS	TOTAL ANNUAL COST
Letterhead Printing Cost	\$.15	30	\$.60
Envelope for Mailing Approval or Denial Letter to Sponsoring Organization	\$.16	30	\$.64
Postage for Mailing Letter	\$.33	30	\$ 7.20
Supplies for Record Keeping (file folder, labels, etc)	\$.40	30	\$ 1.92
Total:			\$24.24

Staff resources are shared with another board. The figures below represent the personal service and expense and equipment costs paid by the Veterinary Medical Board for implementation of this rule.

[illegible]

The Executive Director will review the continuing education program, prepare an acknowledgement letter, place the information on the meeting agenda or conference call for board review and later inform the sponsoring organization of the board's decision. The Clerk IV will prepare a file and copy the material for the agenda notebook and prepare the minutes from the Board meeting.

The board anticipates 30 programs will be submitted for review annually. The board estimates that the review will occur at least 4 times per year. Based on this assumption, the board estimates this continuing education approval process will cost the board approximately \$654.24 annually for the life of the rule.

Total: \$654.24

CONTINUING EDUCATION CERTIFICATES SUBMITTED BY LICENSEES AUDITED BY BOARD

The Board may conduct an audit of licensees to verify compliance with the continuing education requirements. Licensees shall assist the board in its audits by providing timely and complete responses to the board's inquiries. It is estimated that the board will audit approximately 300 licensees and request verification of their attendance at approved continuing education programs. It is the board's assumption that approximately 5 licensees will not submit the verification of their attendance at approved continuing education hours and an investigator will be required to visit

CLASSIFICATION	FEE AMOUNT	NUMBER IN CLASS	TOTAL ANNUAL COST
Letterhead Printing Cost	\$.15	300	\$30
Envelope for Mailing Letter Requesting Verification of Continuing Education	\$.16	300	\$32
Postage for Mailing Request for Information	\$.33	300	\$3.60
Total:			\$ 4.22

[illegible]

The Executive Director will request the information from the licensee and monitor those verifications. The Clerk IV and the Licensing Technician I will review the information received for compliance, update the computer licensing program and report any derogatory information to the Executive Director. The Executive Director will then place the information on the board's meeting agenda for review by the full board.

Due to the various geographic locations of licensees in the state who may not comply and require an investigator to obtain the information in person it is not possible to accurately estimate the cost the investigator could incur while conducting an investigation, however, the board estimates that each investigation will cost the board approximately \$200. The board estimates that 5 licensees will require an investigator to physically visit their homes or business to obtain the information requested by the board annually, therefore, the annual cost to the Missouri Veterinary Medical Board for investigations will be \$1000 annually. Based on this assumption, the board estimates this continuing education approval process will cost the board approximately \$12,964.22 annually for the life of the rule.

Total: \$12,964.22

IV. ASSUMPTIONS

- Employee's salaries were calculated using their annual salary multiplied by 30.75% for fringe benefits and then were divided by 2080 hours per year to determine the hourly salary. The hourly salary was then divided by 60 minutes to determine the cost per minute. The cost per minute was then multiplied by the amount of time individual staff spent on the processing of applications or renewals. The total cost was based on the cost per application multiplied by the estimated number of applications or renewals.
- It is anticipated that the public entity cost will be \$3,618.46 annually for the life of the rule. The total annual cost will recur each year for the life of the rule, may vary with inflation and are expected to increase annually at the rate projected by the Legislative Oversight Committee.

FISCAL NOTE PRIVATE ENTITY COST

I. RULE NUMBER

Title: 4 – Economic Development

Division: 270 – Missouri Veterinary Medical Board

Chapter: 4 – Minimum Standards

Type of Rulemaking: Proposed Amendment

Rule Number and Name: 4 CSR 270-4.042 Minimum Standards for Continuing Education

Prepared March 15, 2000 by the Division of Professional Registration and the Missouri Veterinary Medical Board

II. SUMMARY OF FISCAL IMPACT

Estimate of the number of entities by class which would likely be affected by the adoption of the proposed rule:	Classification by types of the business entities which would likely be affected:	Estimate annual cost of compliance with the rule by the affected entities:
2155	Active Veterinarians Obtaining Continuing Education	\$215,500

Estimate annual cost of
compliance for the
life of the rule.

\$215,500 annually with a
continuous annual increase of
\$1,300 for the life of the rule.

III. WORKSHEET

Continuing Education @ \$100.00

IV. ASSUMPTIONS

1. It is not possible to estimate all costs (i.e., mileage, meals, and lodging) that a licensee could incur in obtaining the required continuing education.
2. The board anticipates 2155 licensees will be required to obtain at least 10 hours of continuing education during the first year of implementation of the rule. Thereafter, the board estimates an annual growth rate of 13 applicants per year for the life of the rule based FY98 and FY99 figures. Therefore, the board estimates that the private entity cost to comply with this rule will be \$215,500 annually with a continuous biennial increase of \$1,300 for the life of the rule.
3. It is anticipated that the total cost will recur annually for the life of the rule, may vary with inflation and is expected to increase annually at the rate projected by the Legislative Oversight Committee.

**Title 4—DEPARTMENT OF ECONOMIC
DEVELOPMENT
Division 270—Missouri Veterinary Medical Board
Chapter 4—Minimum Standards**

PROPOSED AMENDMENT

4 CSR 270-4.050 Minimum Standards for Continuing Education for Veterinary Technicians. The board is proposing to amend sections (1) and (2) and add language in newly numbered sections (5) and (6).

PURPOSE: This proposed amendment clarifies that the five hours of continuing education must be received each year; requires veterinary technicians to obtain their continuing education information for the two previous reporting periods; allows the board to audit veterinary technicians instead of collecting continuing education certificates; and allows the board to take disciplinary action against a licensee for violation of this rule. This amendment also implements Senate Bill 424 of the 90th General Assembly, which made various changes to Chapter 340.

(1) *[Pursuant to 340.324, RSMo, all veterinary technicians annually shall provide satisfactory evidence of having completed five (5) hours of continuing education to renew an active registration.] Each licensee shall certify by signature, under penalty of perjury that s/he has completed five (5) hours of continuing education units (CEUs).*

(2) *At least three (3) hours of the five (5)-hour per year requirement shall be obtained by attending a formal meeting. [Satisfactory evidence to the board shall be to provide on the annual renewal registration application: the name of the meeting, the subject(s) covered, the date it was held and the number of credit hours of continuing education units (CEUs) the applicant earned.]*

(5) *Every licensee shall maintain full and complete records of all approved continuing education hours earned for the two (2) previous reporting periods in addition to the current reporting period. The records shall document the titles of the courses taken, dates, locations, course sponsors, number of hours earned and certificate of attendance or completion. The board may conduct an audit of licensees to verify compliance with the continuing education requirements. Licensees shall assist the board in its audits by providing timely and complete responses to the board's inquiries.*

(6) *Violation of any provision of this rule shall be grounds for discipline in accordance with section 340.264, RSMo.*

AUTHORITY: sections 340.210, 340.258 and 340.324, RSMo [Supp. 1992] 2000. Original rule filed Nov. 4, 1992, effective July 8, 1993. Amended: Filed April 13, 2001.

PUBLIC COST: This proposed amendment will cost the Missouri Veterinary Medical Board \$2,592.50 annually for the life of the rule. It is anticipated that the total cost will recur annually for the life of the rule, may vary with inflation and is expected to increase annually at the rate projected by the Legislative Oversight Committee. A detailed fiscal note, which estimates the cost of compliance with this rule, has been filed with the secretary of state.

PRIVATE COST: This proposed amendment is estimated to cost private entities \$33,800 annually with a continuous biennial increase of \$3,500 for the life of the rule. It is anticipated that these annual costs will recur for the life of the rule, may vary with inflation and is expected to increase annually at the rate projected by the Legislative Oversight Committee. A detailed fiscal note,

which estimates the cost of compliance with this rule, has been filed with the secretary of state.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Missouri Veterinary Medical Board, Dana Hoelscher, Executive Director, PO Box 633, Jefferson City, MO 65102. To be considered, comments must be received within thirty days after publication of this notice in the Missouri Register. No public hearing is scheduled.

FISCAL NOTE
PUBLIC ENTITY COST

I. RULE NUMBER

Title: 4 - Department of Economic Development

Division: 270 - Missouri Veterinary Medical Board

Chapter: 4 - Minimum Standards

Type of Rulemaking: Proposed Rule

Rule Number and Name: 4 CSR 270-4.050 Minimum Standards for Continuing Education for Veterinary Technicians

Prepared March 15, 2000 by the Division of Professional Registration and the Missouri Veterinary Medical Board

II. SUMMARY OF FISCAL IMPACT	
Affected Agency or Political Subdivision	Estimated Annual Cost of Compliance
Missouri Veterinary Medical Board (review of continuing education certificates)	\$2,592.50
Total annual cost for the life of the rule	
	\$2,592.50

III. WORKSHEET

CONTINUING EDUCATION CERTIFICATES SUBMITTED BY LICENSEES AUDITED BY BOARD

The Board may conduct an audit of licensees to verify compliance with the continuing education requirements. Licensees shall assist the board in its audits by providing timely and complete responses to the board's inquiries. It is estimated that the board will audit approximately 50 licensees and request verification of their attendance at approved continuing education programs. It is the board's assumption that approximately 2 licensees will not submit the verification of their attendance at approved continuing education hours and an investigator will be required to visit

CLASSIFICATION	FEE AMOUNT	NUMBER IN CLASS	TOTAL ANNUAL COST
Letterhead Printing Cost	\$.15	50	\$7.50
Envelope for Mailing Letter Requesting Verification of Continuing Education	\$.16	50	\$8.00
Postage for Mailing Request for Information	\$.34	50	\$17.00
Total:			\$32.50

Staff resources are shared with another board. The figures below represent the personal service and expense and equipment costs paid by the Veterinary Medical Board for implementation of this rule.

STAFF	ANNUAL SALARY	SALARY TO INCLUDE FRINGE BENEFITS	HOURLY SALARY	COST PER MINUTE	TIME PER APPLICATION	COST PER APPLICATION	TOTAL ANNUAL COST
Executive Director	\$43,038	\$56,272.19	\$27.05	.45	84 minutes	\$37.80	\$1,890
Clerk IV	\$23,436	\$30,642.57	\$14.73	.25	12 minutes	\$3.00	\$150
Licensure Technician II	\$19,040	\$24,894.85	\$11.97	.20	12 minutes	\$2.40	\$120
Total:							\$2,160.00

The Executive Director will request the information from the licensee and monitor those verifications. The Clerk IV and the Licensing Technician I will review the information received for compliance, update the computer licensing program and report any derogatory information to the Executive Director. The Executive Director will then place the information on the board's meeting agenda for review by the full board.

Due to the various geographic locations of licensees in the state who may not comply and require an investigator to obtain the information in person it is not possible to accurately estimate the cost the investigator could incur while conducting an investigation, however, the board estimates that each investigation will cost the board approximately \$200. The board estimates that 2 licensees will require an investigator to physically visit their homes or business to obtain the information requested by the board annually, therefore, the annual cost to the Missouri Veterinary Medical Board for investigations will be \$400 annually. Based on this assumption, the board estimates this continuing education approval process will cost the board approximately \$2,592.50 annually for the life of the rule.

Total: \$2,592.50

IV. ASSUMPTIONS

- Employee's salaries were calculated using their annual salary multiplied by 30.75% for fringe benefits and then were divided by 2080 hours per year to determine the hourly salary. The hourly salary was then divided by 60 minutes to determine the cost per minute. The cost per minute was then multiplied by the amount of time individual staff spent on the processing of applications or renewals. The total cost was based on the cost per application multiplied by the estimated number of applications or renewals.
- It is anticipated that the public entity cost will be \$2,592.50 annually for the life of the rule. The total annual cost will recur each year for the life of the rule, may vary with inflation and are expected to increase annually at the rate projected by the Legislative Oversight Committee.

FISCAL NOTE PRIVATE ENTITY COST

I. RULE NUMBER

Title: 4 – Economic Development

Division: 270 – Missouri Veterinary Medical Board

Chapter: 4 – Minimum Standards

Type of Rulemaking: Proposed Amendment

Rule Number and Name: 4 CSR 270-4.050 Minimum Standards for Continuing Education for Veterinary Technicians

Prepared March 15, 2000 by the Division of Professional Registration and the Missouri Veterinary Medical Board

II. SUMMARY OF FISCAL IMPACT

Estimate of the number of entities by class which would likely be affected by the adoption of the proposed rule:	Classification by types of the business entities which would likely be affected:	Estimate annual cost of compliance with the rule by the affected entities:
338	Active Veterinary Technicians Obtaining Continuing Education	\$33,800

Estimate annual cost of
compliance for the
life of the rule.

\$33,800 annually with a
continuous annual increase of
\$3,500 for the life of the rule.

III. WORKSHEET

Continuing Education @ \$100.00

IV. ASSUMPTIONS

4. It is not possible to estimate all costs (i.e., mileage, meals, and lodging) that a licensee could incur in obtaining the required continuing education.
5. The board anticipates 338 licensees will be required to obtain at least 5 hours of continuing education during the first year of implementation of the rule. Thereafter, the board estimates an annual growth rate of 35 applicants per year for the life of the rule based FY98 and FY99 figures. Therefore, the board estimates that the private entity cost to comply with this rule will be \$33,800 annually with a continuous biennial increase of \$3,500 for the life of the rule.
6. It is anticipated that the total cost will recur annually for the life of the rule, may vary with inflation and is expected to increase annually at the rate projected by the Legislative Oversight Committee.

Title 4—DEPARTMENT OF ECONOMIC
DEVELOPMENT

Division 270—Missouri Veterinary Medical Board
Chapter 4—Minimum Standards

PROPOSED AMENDMENT

4 CSR 270-4.060 Minimum Standards for Supervision. The board is proposing to amend section (1) and add a new section (3).

PURPOSE: This proposed amendment adds the veterinary medical candidate, temporary licensee, provisional licensee and veterinary medical preceptee as individuals that fall under a supervising veterinarian and clarifies that a supervising veterinarian must hold a current and unencumbered license. This amendment also implements Senate Bill 424 of the 90th General Assembly, which made various changes to Chapter 340.

(1) Duties of the Supervising Veterinarian—

(A) The supervising veterinarian shall be responsible for determining the competency of the veterinary technician, **veterinary medical candidate, temporary licensee, provisional licensees, veterinary medical preceptee** or unregistered assistant to perform delegated animal health care tasks;

(B) The supervising veterinarian of a veterinary technician, **veterinary medical candidate, temporary licensee, provisional licensees, veterinary medical preceptee** or unregistered assistant shall make all decisions relating to the diagnosis, treatment, management and future disposition of the animal patient; and

(C) The supervising veterinarian shall have examined the animal patient prior to the delegation of any animal health care task to either a veterinary technician, **veterinary medical candidate, temporary licensee, provisional licensees, veterinary medical preceptee** or an unregistered assistant. The examination of the animal patient shall be conducted at such time as good veterinary medical practice requires consistent with the particular delegated animal health care task.

(2) The required levels of supervision of individuals with different levels of training performing various delegated animal health care tasks are designated in the accompanying table, **included herein**.

(3) **The supervising veterinarian must be in good standing. To be in good standing the veterinarian's license(s) must be current and unencumbered.**

AUTHORITY: sections 340.210, 340.222 and 340.326, RSMo [Supp. 1992] 2000. Original rule filed Nov. 4, 1992, effective July 8, 1993. Amended: Filed April 13, 2001.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than \$500 in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than \$500 in the aggregate.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Missouri Veterinary Medical Board, Dana Hoelscher, Executive Director, PO Box 633, Jefferson City, MO 65102. To be considered, comments must be received within thirty days after publication of this notice in the Missouri Register. No public hearing is scheduled.

Title 4—DEPARTMENT OF ECONOMIC
DEVELOPMENT

Division 270—Missouri Veterinary Medical Board
Chapter 5—Veterinary Facilities Permits

PROPOSED AMENDMENT

4 CSR 270-5.011 Permit Applications. The board is proposing to amend sections (4) and (6), add new sections (7) and (8), and delete the form that immediately follows this rule in the *Code of State Regulations*.

PURPOSE: This proposed amendment outlines the requirements for corporations to own veterinary facilities and specifies that changes of name or location require a new facility permit. This amendment also implements Senate Bill 424 of the 90th General Assembly, which made various changes to Chapter 340.

(4) The following documents must be on file for a permit application to be considered complete:

(A) Completed application;

(B) Appropriate fee; *and*

(C) Completed self-inspection form/. / ; *and*

(D) **If a business entity owns the facility, a copy of the articles of incorporation, partnership agreement or business organization documents that clearly state that the licensed veterinarian is not subject to the direction of anyone not licensed to practice veterinary medicine in Missouri in making veterinary medical decisions or judgments.**

(6) If ownership of a veterinary facility changes, the veterinarian in charge to whom the permit was originally issued is responsible for notifying the board and returning the permit within thirty (30) days of the change in ownership. The veterinarian in charge *[shall]* **must apply for a new permit and submit all applicable fees** prior to performing any veterinary services in the facility.

(7) **If the name of a veterinary facility changes, the veterinarian in charge is responsible for notifying the board and returning the permit within thirty (30) days of the name change. The veterinarian in charge must apply for a new permit and submit all applicable fees prior to doing business under the new name.**

(8) **If the physical location of a veterinary facility changes, the veterinarian in charge is responsible for notifying the board and returning the permit within thirty (30) days of the location change. The veterinarian in charge must complete a facility permit and self-inspection form with the new location information.**

(9) **If a change of ownership, location, name and/or function has occurred, the veterinarian in charge must apply for a new permit and submit all applicable fees prior to performing any veterinary services in the facility.**

AUTHORITY: sections 340.210 and 340.226, RSMo [Supp. 1993] 2000. Original rule filed Nov. 4, 1992, effective July 8, 1993. Amended: Filed April 14, 1994, effective Sept. 30, 1994. Amended: Filed April 13, 2001.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than \$500 in the aggregate.

PRIVATE COST: This proposed amendment is estimated to cost private entities \$2,100 annually for the life of the rule, may vary with inflation and is expected to increase annually at the rate projected by the Legislative Oversight Committee. A detailed fiscal

note, which estimates the cost of compliance with this rule, has been filed with the secretary of state.

*NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Missouri Veterinary Medical Board, Dana Hoelscher, Executive Director, PO Box 633, Jefferson City, MO 65102. To be considered, comments must be received within thirty days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.*

**FISCAL NOTE
PRIVATE ENTITY COST**

I. RULE NUMBER

Title: 4 – Department of Economic Development

Division: 270 – Missouri Veterinary Medical Board

Chapter: 5 – Veterinary Facilities Permits

Type of Rulemaking: Proposed Amendment

Rule Number and Name: 4 CSR 270-5.011 Permit Applications

Prepared March 15, 2000 by the Division of Professional Registration and the Missouri Veterinary Medical Board

II. SUMMARY OF FISCAL IMPACT

Estimate of the number of entities by class which would likely be affected by the adoption of the proposed rule:	Classification by types of the business entities which would likely be affected:	Estimate annual cost increase of compliance with the rule by the affected entities:
21	Veterinary Facilities (Change of name or location)	\$2,100
Total annual increase cost for the life of the rule		\$2,100

III. WORKSHEET

Facility Permit @\$100

IV. ASSUMPTIONS

1. Based on FY99 figures the board estimates 21 facilities will either have change of name or location per year. The private entity cost for this proposed amendment is estimated to be \$2100 annually for the life of the rule.
2. It is anticipated that the total annual cost will recur for the life, may vary with inflation and is expected to increase annually at the rate projected by the Legislative Oversight Committee.

**Title 4—DEPARTMENT OF ECONOMIC
DEVELOPMENT
Division 270—Missouri Veterinary Medical Board
Chapter 7—Disciplinary Proceedings**

PROPOSED AMENDMENT

4 CSR 270-7.020 Revocation of Temporary or Provisional License. The board is proposing to change the title and amend section (1).

PURPOSE: This proposed amendment outlines the procedures to be used for revocation of a provisional license under section 340.250, RSMo. This amendment also implements Senate Bill 424 of the 90th General Assembly, which made various changes to Chapter 340.

(1) All proceedings instituted or conducted by the board, or both, in regard to the revocation of temporary **or provisional** licenses as authorized under section 340.250, RSMo shall be handled in accordance with the provisions as set forth under Chapter 536, RSMo as a contested case.

AUTHORITY: sections 340.210 and 340.250, RSMo [Supp. 1992] 2000. Original rule filed Nov. 4, 1992, effective July 8, 1993. Amended: Filed April 13, 2001.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than \$500 in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than \$500 in the aggregate.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Missouri Veterinary Medical Board, Dana Hoelscher, Executive Director, PO Box 633, Jefferson City, MO 65102. To be considered, comments must be received within thirty days after publication of this notice in the Missouri Register. No public hearing is scheduled.

**Title 11—DEPARTMENT OF PUBLIC SAFETY
Division 45—Missouri Gaming Commission
Chapter 5—Conduct of Gaming**

PROPOSED AMENDMENT

11 CSR 45-5.100 Chip Specifications. The commission is amending sections (1) and (2).

PURPOSE: This amendment establishes chip specifications.

(1) Value Chips.

(B) **Unless otherwise authorized by the commission,** [/V]value chips may be issued by Class A licensees in denominations of fifty cents, one, **two and one-half**, five, twenty, twenty-five, one hundred and five hundred dollars (50¢, \$1, **\$2.50**, \$5, \$20, \$25, \$100 and \$500). The licensees shall have the discretion to determine the denominations to be utilized on its riverboat and the amount of each denomination necessary for the conduct of gaming operations.

(C) Each denomination of value chip shall have a different primary color from every other denomination of value chip. **Unless otherwise approved by the commission,** [/V]value chips shall fall within the colors set forth in this subsection when the chips are viewed both in daylight and under incandescent light. In conjunction with these primary colors, each holder of a Class A license shall utilize contrasting secondary colors for the edge spots on each denomination of value chip. Unless otherwise approved by the commission, no holder of a Class A license shall use a secondary

color on a specific denomination of chip identical to the secondary color used by another holder of a Class A license on that same denomination of value chip. The primary color to be utilized by each holder of a Class A license for each denomination of value chip shall be—

- | | |
|----------------|---------------------|
| 1. 50¢ | Pink |
| 2. \$ 1 | White |
| 3. \$ [5/2.50 | [Red] Blue |
| 4. \$ [20/5 | [Yellow] Red |
| 5. \$ [25/20 | [Green] Yellow |
| 6. \$ [100/25 | [Black] Green |
| 7. \$ [500/100 | [Fire Orange] Black |
| 8. \$ 500 | Fire Orange |

(2) Nonvalue Chips.

(E) Each holder of a Class A license shall have the discretion to permit, limit or prohibit the use of value chips in gaming at roulette provided[/], however, that it shall be the responsibility of the licensee to keep an accurate account of the wagers being made at roulette with value chips so that the wagers made by one player are not confused with those made by another player at the table.

AUTHORITY: sections 313.004, 313.805[, 313.807, RSMo Supp. 1997] and 313.817, RSMo [1994] 2000. Emergency rule filed Sept. 1, 1993, effective Sept. 20, 1993, expired Jan. 17, 1994. Emergency rule filed Jan. 5, 1994, effective Jan. 18, 1994, expired Jan. 30, 1994. Original rule filed Sept. 1, 1993, effective Jan. 31, 1994. Amended: Filed May 13, 1998, effective Oct. 30, 1998. Amended: Filed April 3, 2001.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than \$500 in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than \$500 in the aggregate.

NOTICE OF PUBLIC HEARING AND NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Missouri Gaming Commission, PO Box 1847, Jefferson City, MO 65102. To be considered, comments must be received within thirty days after publication of this notice in the Missouri Register. A public hearing is scheduled at 10:00 a.m. on June 19, 2001 in the Gaming Commission's hearing room, 3417 Knipp Drive, Jefferson City, Missouri.

**Title 11—DEPARTMENT OF PUBLIC SAFETY
Division 45—Missouri Gaming Commission
Chapter 5—Conduct of Gaming**

PROPOSED AMENDMENT

11 CSR 45-5.237 [Interstate] Shipping of Electronic Gaming Devices. The commission is amending the title, Purpose and sections (1) and (2).

PURPOSE: The purpose for this amendment is to allow shipment of electronic gaming devices only where the erasable, programmable read-only memory (EPROM), compact disk functioning as a read-only memory (CD-ROM), or other storage medium containing the main game program, is shipped separately from the electronic gaming device.

PURPOSE: This rule requires [suppliers of electronic gaming devices] licensees to notify the Missouri Gaming Commission prior to shipping [such] electronic gaming devices into, [or] out of, or within the state.

(1) *[Supplier's]*Licensees shipping electronic gaming devices *[interstate, whether]* into, *[or from]* out of, or within Missouri, must file on a form specified by the commission notice at least five (5) days prior to such shipment.

(2) The *[circuit board containing the]* erasable, programmable read-only memory (EPROM), **compact disk functioning as a read-only memory (CD-ROM), or other storage medium which contains the main-game program**, shall *[not]* be shipped *[installed in]* separately from the electronic gaming devices.

AUTHORITY: sections 313.004, 313.805 and 313.807.4, RSMo [1994] 2000. Original rule filed Sept. 2, 1997, effective March 30, 1998. Amended: Filed April 3, 2001.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than \$500 in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than \$500 in the aggregate.

NOTICE OF PUBLIC HEARING AND NOTICE TO SUBMIT COMMENTS: *Anyone may file a statement in support of or in opposition to this proposed amendment with the Missouri Gaming Commission, PO Box 1847, Jefferson City, MO 65102. To be considered, comments must be received within thirty days after publication of this notice in the Missouri Register. A public hearing is scheduled for 10:00 a.m. on June 19, 2001, at the Missouri Gaming Commission's Hearing Room, 3417 Knipp Drive, Jefferson City, Missouri.*

**Title 11—DEPARTMENT OF PUBLIC SAFETY
Division 45—Missouri Gaming Commission
Chapter 12—Liquor Control**

PROPOSED AMENDMENT

11 CSR 45-12.090 Rules of Liquor Control. The commission is amending sections (7) and (18).

PURPOSE: The purpose for this amendment is to clarify the licensee's authority to sell beer brewed by the licensee pursuant to a valid microbrewer's license and to clarify the licensee's authority to make sales via a controlled access liquor cabinet system.

(7) May Not Possess Unless Purchased from a Wholesaler or **Manufactured by Licensee Pursuant to a Valid Microbrewer's License.** No excursion liquor licensee shall possess any intoxicating liquor which has not been purchased from, by or through wholesalers duly licensed by the Missouri Supervisor of Liquor Control, or **brewed by the licensee pursuant to a valid microbrewer's license issued to the licensee by the Missouri Supervisor of Liquor Control.** All purchases of intoxicating liquor containing alcohol in excess of five percent (5%) by weight, shall be purchased at the price posted at the Division of Liquor Control pursuant to sections 311.332-311.338, RSMo and 11 CSR 70-2.190.

(18) Dispensing by Mechanical Devices Prohibited. No retail licensee shall use or permit to be used upon his/her/its licensed premises any self-service, coin-operated, mechanical devices or automatic dispensers for the purpose of selling or dispensing intoxicating liquor. **This shall not prohibit sales using a controlled access liquor cabinet system as provided in 11 CSR 45-12.091.**

AUTHORITY: sections 313.004, 313.805 and 313.840, RSMo [1994] 2000. Emergency rule filed Sept. 1, 1993, effective Sept. 20, 1993, expired Jan. 17, 1994. Emergency rule filed Jan. 5,

1994, effective Jan. 18, 1994, expired Jan. 30, 1994. Original rule filed Sept. 1, 1993, effective Jan. 31, 1994. For intervening history, please consult the Code of State Regulations. Amended: Filed April 3, 2001.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than \$500 in the aggregate.

PRIVATE COST: This proposed amendment will cost private entities more than \$500 in the aggregate. See fiscal note.

NOTICE OF PUBLIC HEARING AND NOTICE TO SUBMIT COMMENTS: *Anyone may file a statement in support of or in opposition to this proposed amendment with the Missouri Gaming Commission, PO Box 1847, Jefferson City, MO 65102. To be considered, comments must be received within thirty days after publication of this notice in the Missouri Register. A public hearing is scheduled for 10:00 a.m. on June 19, 2001, in the Missouri Gaming Commission's hearing room, 3417 Knipp Drive, Jefferson City, Missouri.*

**FISCAL NOTE
PRIVATE ENTITY COST****I. RULE NUMBER**Title: 11 - DEPARTMENT OF PUBLIC SAFETYDivision: 45 - Missouri Gaming CommissionChapter: 12 – Liquor ControlType of Rulemaking: Proposed AmendmentRule Number and Name: 11 CSR 45-12.090 – Rules of Liquor Control**II. SUMMARY OF FISCAL IMPACT**

Estimate of the number of entities by class which would likely be affected by the adoption of the proposed rule:	Classification by types of the business entities which would likely be affected:	Estimate in the aggregate as to the cost of compliance with the rule by the affected entities:
1	Excursion Riverboat Gambling Licensees	\$100,000 to \$750,000

III. WORKSHEET**IV. ASSUMPTIONS**

If a licensee chooses to become licensed as a microbrewer, costs associated with equipment and related supplies could range from \$100,000 to \$750,000.

**Title 11—DEPARTMENT OF PUBLIC SAFETY
Division 45—Missouri Gaming Commission
Chapter 12—Liquor Control**

PROPOSED RULE

11 CSR 45-12.091 Controlled Access Liquor Cabinet Systems

PURPOSE: The purpose for this rule is to allow qualifying licensees to make sales using a controlled access liquor cabinet system.

(1) As used in this section, the following terms mean:

(A) "Controlled access liquor cabinet," a closed container, either refrigerated in whole or in part or nonrefrigerated, access to the interior of which is restricted by means of a locking device which requires the use of a key, access by means of a locking device as hereinabove described;

(B) "Controlled access liquor cabinet system," a system for the sale of intoxicating liquor in qualified packages or containers in the rooms provided for the overnight accommodation of transient guests in a qualified establishment by means of a controlled access liquor cabinet, and such system shall permit the licensee to maintain in the rooms provided for the overnight accommodation of transient guests a controlled access liquor cabinet in which such licensee may maintain for sale intoxicating liquor in qualified packages or containers, together with, if desired, other beverages or food, and such system shall permit the adult registered guests of the room in which such controlled access liquor cabinet is located to use the key, magnetic card or other similar device to gain access to such controlled access liquor cabinet to obtain the intoxicating liquor or other beverages or food for consumption;

(C) "Qualified establishment," any establishment having at least forty (40) rooms for the overnight accommodation of transient guests and having a restaurant or similar facility on the premises at least sixty percent (60%) of the gross income of which is derived from the sale of prepared meals or food, which restaurant's annual gross food sales for the past two (2) years immediately preceding its application for a license shall not have been less than one hundred thousand dollars (\$100,000) per year or, if such restaurant has been in operation for less than two (2) years, such restaurant has been in operation for at least ninety (90) days preceding the application for license for sale of intoxicating liquor by means of controlled access liquor cabinets and has a projected experience based upon its sale of food during the preceding ninety (90) days which would exceed one hundred thousand dollars (\$100,000) per year;

(D) "Qualified packages or containers," packages or containers for intoxicating liquor, other than beer or other malt liquor, which hold not less than fifty (50) milliliters and not more than two hundred (200) milliliters, and any packages or containers for beer or other malt liquor;

(E) "Registered guest," each person who signs his/her name to the guest register of the qualified establishment or takes some other equivalent action for the purpose of registering as a guest of such qualified establishment;

(F) "Room," a room in a qualified establishment which is intended to be used as, and which is provided for, the overnight accommodation of transient guests.

(2) Notwithstanding any other provision of this chapter to the contrary, any person who possesses the qualifications required by this chapter, and who now or hereafter meets the requirements of and complies with the provisions of this chapter, and who operates a qualified establishment and who is licensed to sell liquor by the drink at retail with respect to such qualified establishment, may apply for, and the supervisor of liquor control shall issue, a license to sell intoxicating liquor in the rooms of such qualified establish-

ment by means of a controlled access liquor cabinet system on and subject to the following terms and conditions:

(A) The key, magnetic card or other similar device required to attain access to the controlled access liquor cabinet in a particular room may be provided only to each adult registered guest who is registered to stay in such room;

(B) Prior to providing a key, magnetic card or other similar device required to attain access to the controlled access liquor cabinet in a particular room to the registered guest, the licensee shall verify that each such registered guest to whom such key, magnetic card or similar device is to be provided is not a minor, as defined by section 311.310, RSMo;

(C) All employees handling the intoxicating liquor to be placed in the controlled access liquor cabinet, including without limitation any employee who inventories and/or restocks and replenishes the intoxicating liquor in the controlled access liquor cabinet, shall be at least eighteen (18) years of age and shall obtain such employee permits as the city, county or other local governmental entity in which the qualified establishment is located requires to be obtained by employees of the restaurant operated at such qualified establishment; provided, however, that no such employee permits shall be required of any employee who handles the intoxicating liquor in the original case and who does not open such original case;

(D) Registered guests may use the key, magnetic card or other similar device required to attain access to the controlled access liquor cabinet in such registered guest's room at any time; provided, however, that no controlled access liquor cabinet may be restocked or replenished with intoxicating liquor, nor shall any intoxicating liquor be delivered to a room in order to restock or replenish the supply of intoxicating liquor in the controlled access liquor cabinet, at any time when the restaurant operated at the qualified establishment is not permitted to sell liquor by the drink at retail pursuant to the provisions of this chapter;

(E) Upon request from the registered guest at any time, the qualified establishment shall cause all intoxicating liquor to be removed from the controlled access liquor cabinet in the room of such registered guest as soon as reasonably practicable; and

(F) The qualified establishment shall have the right to collect payment for the intoxicating liquor or other beverages or food taken from the controlled access liquor cabinet in the room of a registered guest in such manner as it shall determine to be appropriate, including without limitation the inclusion of such charges together with the charges made to such registered guest for the use of the room or for purchase of meals at the restaurant operated at such qualified establishment.

(3) Any new qualified establishment having been in operation for less than ninety (90) days may be issued a temporary license to sell intoxicating liquor in the rooms of such qualified establishment by means of a controlled access liquor cabinet system for a period not to exceed ninety (90) days if such establishment can show a projection of an annual business from prepared meals or food which would exceed not less than one hundred thousand dollars (\$100,000) per year.

(4) In addition to any right to sell granted pursuant to any other provision of this chapter, a duly licensed wholesaler shall be permitted to sell intoxicating liquor to a qualified establishment in any size of qualified packages or containers for use in a controlled access liquor cabinet system; provided, however, that as to any size of qualified packages or containers which could not be legally sold to the qualified establishment except for the provisions of this section, any such size of qualified packages or containers shall be sold by the qualified establishment only by means of the controlled access liquor cabinet system.

AUTHORITY: sections 313.004, 313.805 and 313.840, RSMo 2000. Original rule filed April 3, 2001.

PUBLIC COST: This proposed rule will not cost state agencies or political subdivisions more than \$500 in the aggregate.

PRIVATE COST: This proposed rule will cost private entities more than \$500 in the aggregate. See fiscal note.

*NOTICE TO PUBLIC HEARING AND NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Missouri Gaming Commission, PO Box 1847, Jefferson City, MO 65102. To be considered, comments must be received within thirty days after publication of this notice in the **Missouri Register**. A public hearing is scheduled for 10:00 a.m. on June 19, 2001 in the Missouri Gaming Commission's hearing room, 3417 Knipp Drive, Jefferson City, Missouri.*

**FISCAL NOTE
PRIVATE ENTITY COST**

I. RULE NUMBER

Title: 11 - DEPARTMENT OF PUBLIC SAFETY

Division: 45 - Missouri Gaming Commission

Chapter: 12 - Liquor Control

Type of Rulemaking: Proposed Amendment

Rule Number and Name: 11 CSR 45-12.091 – Controlled Access Liquor Cabinet Systems

II. SUMMARY OF FISCAL IMPACT

Estimate of the number of entities by class which would likely be affected by the adoption of the proposed rule:	Classification by types of the business entities which would likely be affected:	Estimate in the aggregate as to the cost of compliance with the rule by the affected entities:
1	Excursion Riverboat Gambling Licensees	\$1,050

III. WORKSHEET

IV. ASSUMPTIONS

If a licensee chooses to install controlled access liquor cabinet systems, the cost is estimated at approximately \$1,050 per hotel room.

**Title 12—DEPARTMENT OF REVENUE
Division 10—Director of Revenue
Chapter 3—State Sales Tax**

PROPOSED RESCISSION

12 CSR 10-3.280 Sale of Agricultural Products by the Producer. This rule interpreted the sales tax law as it applied to sales of agricultural products by the producer and interpreted and applied section 144.030.2(22), RSMo.

PURPOSE: This rule is being rescinded because it is superseded by other rules.

AUTHORITY: section 144.270, RSMo 1994. This rule was previously filed as rule no. 61 on Jan. 22, 1973, effective Feb. 1, 1973. S.T. regulation 030-16 was last filed Dec. 31, 1975, effective Jan. 10, 1976. Refiled March 30, 1976. Rescinded: Filed April 5, 2001.

PUBLIC COST: This proposed rescission will not cost state agencies or political subdivisions more than \$500 in the aggregate.

PRIVATE COST: This proposed rescission will not cost private entities more than \$500 in the aggregate.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to the proposed rescission with the Department of Revenue, Office of Legislation and Regulations, PO Box 629, Jefferson City, MO 65105. To be considered, comments must be received within thirty days after publication of this notice in the *Missouri Register*. No public hearing is scheduled.

**Title 12—DEPARTMENT OF REVENUE
Division 10—Director of Revenue
Chapter 3—State Sales Tax**

PROPOSED RESCISSION

12 CSR 10-3.882 Accrual Basis Reporting. This rule defined gross receipts and clarified how sellers were to report sales tax when their accounting method approximated gross receipts.

PURPOSE: This rule is being rescinded because it is superseded by other rules.

AUTHORITY: section 144.270, RSMo 1994. Original rule filed Oct. 25, 1990, effective March 14, 1991. Rescinded: Filed April 5, 2001.

PUBLIC COST: This proposed rescission will not cost state agencies or political subdivisions more than \$500 in the aggregate.

PRIVATE COST: This proposed rescission will not cost private entities more than \$500 in the aggregate.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to the proposed rescission with the Department of Revenue, Office of Legislation and Regulations, PO Box 629, Jefferson City, MO 65105. To be considered, comments must be received within thirty days after publication of this notice in the *Missouri Register*. No public hearing is scheduled.

**Title 13—DEPARTMENT OF SOCIAL SERVICES
Division 30—Child Support Enforcement
Chapter 2—Performance Measures**

PROPOSED AMENDMENT

13 CSR 30-2.010 Prosecuting Attorneys' Performance Standards. The division is amending subsections (2)(K) and adding a new subsection (2)(D).

PURPOSE: The purpose of this amendment is to revise the time frames for prosecuting attorneys to file a petition under the Uniform Interstate Family Support Act to 14 days after all necessary information is received and to require prosecuting attorneys to attempt to establish a medical support order in all establishment actions.

(2) Performance Requirements Standards for All Counties on Cases Referred by the Division.

(K) [In all cases requiring that a petition be filed in another state under the Uniform Reciprocal Enforcement of Support Act (URES), the prosecuting attorney shall file the URESA petition within fourteen (14) calendar days after receiving the referral from the division, or within twenty (20) calendar days from the date of location of the absent parent, whichever is longer.] In all cases requiring that a petition be filed in another state under the Uniform Interstate Family Support Act (UIFSA), the prosecuting attorney shall file the UIFSA petition within fourteen (14) calendar days after receiving the referral from the division and, if appropriate, receipt of any necessary information needed to process the case.

(O) In all petitions filed with the court for the establishment of child support orders, the prosecuting attorney shall request an order for medical support.

AUTHORITY: section[s] 454.400.2(5) [and 454.500], RSMo [1994] 2000. Original rule filed Oct. 18, 1988, effective Jan. 13, 1989. Amended: Filed April 12, 2001.

PUBLIC COST: This proposed amendment is not estimated to cost state agencies or political subdivisions more than \$500 in the aggregate.

PRIVATE COST: This proposed amendment is not estimated to cost private entities more than \$500 in the aggregate.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Division of Child Support Enforcement, Gary Bailey, Director, Division of Child Support Enforcement, 3418 Knipp Drive, Suite F, Jefferson City, MO 65109. To be considered, comments must be received within thirty days after publication of this notice in the *Missouri Register*. No public hearing is scheduled.

**Title 16—RETIREMENT SYSTEMS
Division 10—The Public School Retirement System of Missouri
Chapter 3—Funds of Retirement System**

PROPOSED AMENDMENT

16 CSR 10-3.010 Payment of Funds to the Retirement System. The board is amending subsection (11)(E).

PURPOSE: This amendment provides an additional exception to the twenty percent limit on salary increases during a member's final average salary period.

(11) The terms "salary," "salary rate" and "compensation" are synonymous when used in regulations promulgated by the board, unless the context plainly requires a different meaning.

(E) In determining "final average salary" as defined in section 169.010, RSMo, the system will disregard any increase in compensation in excess of twenty percent (20%) from one year to the

next in the final average salary period. This limit will not apply to increases due to bona fide changes in position or employer [or], increases required by state statute, or district wide salary schedule adjustments for previously unrecognized education related service.

AUTHORITY: section 169.020 RSMo [Supp. 1998] 2000. Original rule filed Dec. 19, 1975, effective Jan. 1, 1976. Amended: Filed Feb. 16, 1988, effective July 1, 1988. Amended: Filed April 18, 1989, effective July 1, 1989. Amended: Filed April 24, 1996, effective Nov. 30, 1996. Amended: Filed Feb. 13, 1997, effective July 1, 1997. Amended: Filed July 8, 1997, effective Jan. 30, 1998. Amended: Filed June 14, 1999, effective Dec. 30, 1999. Amended: Filed April 12, 2001.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than \$500 in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than \$500 in the aggregate.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Public School and Non-Teacher School Employee Retirement Systems of Missouri, Joel Walters, Executive Director, PO Box 268, Jefferson City, MO 65102. To be considered, comments must be received within thirty days after publication of this notice in the Missouri Register. No public hearing is scheduled.

Title 19—DEPARTMENT OF HEALTH

Division 10—Office of the Director

Chapter 33—Hospital and Ambulatory Surgical Center Data Disclosure

PROPOSED AMENDMENT

19 CSR 10-33.010 Reporting Patient Abstract Data by Hospitals and Ambulatory Surgical Centers. The department proposes to amend this rule by amending subsection (1)(I) to move Exhibit A from the conclusion of all the rules in this chapter to the conclusion of this rule; section (4), subsection (4)(B); section (8); and replacing Exhibit B.

PURPOSE: This amendment is to make the patient abstract data reporting requirements consistent with provisions of the Health Insurance Portability and Accountability Act (HIPAA) of 1996, as they relate to standards for health data transactions, and to improve the capacity of the department to provide analyses and statistical information on community health assessments and public health topics.

(1) The following definitions shall be used in the interpretation of this rule:

(I) Outpatient encounters means patients seen in the emergency room, patients receiving invasive procedures on an outpatient basis—CPT codes 10000-69999 and ICD-9-CM codes 01.0-86.99, inclusive—and patients receiving selected services and procedures as defined in Exhibit A of this rule, **included herein**;

(4) The patient abstract data shall include the data elements and conform to the specifications listed in Exhibit B of this rule, **included herein**, and shall be submitted on [magnetic] electronic media. Acceptable [magnetic] electronic media include the following:

(B) [Floppy disk (MS-DOS/PC-DOS compatible). Three and one-half-inch (3 1/2") eighty (80) tracks per side,

eighteen (18) sectors per track, double-sided (1.44 Mb). Shall be on media rated at least 135 tpi with 2.0 Mb total rating] IBM formatted 1.44 Mb diskette; or

(8) The department shall develop and publish reports pertaining to individual hospitals and ambulatory surgical centers. The reports may include information on charges and quality of care indicators. The reports and the data they contain shall be public information and may be released on [magnetic] electronic media. The department shall make the reports and data available for a reasonable charge based on incurred costs.

CPT-4 Code	Description	ICD-9-CM Equiv.	CPT-4 Code	Description	ICD-9-CM Equiv.	CPT-4 Code	Description	ICD-9-CM Equiv.
43265	Endoscopic retrograde cholangiopancreatography (ERCP), with or without biopsy or collection of specimen, or both; for destruction lithotripsy of stone, any method	51.10	71260	with contrast material(s)	87.41	73202	without contrast material, followed by contrast material(s) and further sections	88.38
50080	Percutaneous nephrostolithotomy or pyelostolithotomy, with or without dilation endoscopy, lithotripsy, stenting or basket extraction; up to 2 cm	55.03	71550	Magnetic resonance (*proton) imaging, chest (for example, evaluation of hilar and mediastinal lymphadenopathy)	88.92	73220	Magnetic resonance (*proton) imaging, upper extremity, other than joint	88.94
50081	over 2 cm	55.03	72125	Computerized axial tomography, cervical spine; without contrast material	88.38	73221	Magnetic resonance (*proton) imaging, any joint of upper extremity	88.94
50590	Lithotripsy, extracorporeal shock wave	98.51	72126	with contrast material	88.38	73700	Computerized axial tomography, lower extremity; without contrast material	88.38
52337	Cystourethroscopy, with ureteroscopy or pyeloscopy, or both (includes dilation of the ureter by any method); with lithotripsy (ureteral catheterization is included)	56.0	72127	without contrast material, followed by contrast material(s) and further sections	88.38	73701	with contrast material(s)	88.38
70336	Magnetic resonance (*proton) imaging, temporomandibular joint	88.97	72128	Computerized axial tomography, thoracic spine; without contrast material	88.38	73702	without contrast material, followed by contrast material(s) and further sections	88.38
70450	Computerized axial tomography, head or brain; without contrast material	87.03	72129	with contrast material	88.38	73720	Magnetic resonance (*proton) imaging, lower extremity, other than joint	88.94
70460	with contrast material(s)	87.03	72130	without contrast material, followed by contrast material(s) and further sections	88.38	73721	Magnetic resonance (*proton) imaging, any joint of lower extremity	88.94
70470	without contrast material, followed by contrast material(s) and further sections	87.03	72131	Computerized axial tomography, lumbar spine; without contrast material	88.38	74150	Computerized axial tomography, abdomen; without contrast material	88.01
70480	Computerized axial tomography, orbit, sella, or posterior fossa or outer, middle, or inner ear; without contrast material	87.03	72132	with contrast material	88.38	74160	with contrast material(s)	88.01
70481	with contrast material(s)	87.03	72133	without contrast material, followed by contrast material(s) and further sections	88.38	74170	without contrast material, followed by contrast material(s) and further sections	88.01
70482	without contrast material, followed by contrast material(s) and further sections	87.03	72141	Magnetic resonance (*proton) imaging, spinal canal and contents, cervical; with out contrast material	88.93	74181	Magnetic resonance (*proton) imaging, abdomen	88.97
70486	Computerized axial tomography, maxillofacial area; with out contrast material	87.03	72142	with contrast material(s)	88.93	75552	Magnetic resonance (*proton) imaging, myocardium	88.92
70487	with contrast material(s)	87.03	72146	Magnetic resonance (*proton) imaging, spinal canal and contents, thoracic; with out contrast material	88.93	76070	Computerized tomography, bone density study	88.98
70488	without contrast material, followed by contrast material(s) and further sections	87.03	72147	with contrast material(s)	88.93	76355	Computerized tomography guidance for stereotactic localization	87.03
70490	Computerized axial tomography, soft tissue neck; without contrast material	88.38	72148	Magnetic resonance (*proton) imaging, spinal canal and contents, lumbar; with out contrast material	88.93	76360	Computerized tomography guidance for needle biopsy, radiological supervision and interpretation	88.38
70491	with contrast material(s)	88.38	72149	with contrast material(s)	88.93	76365	Computerized tomography guidance for cyst aspiration, radiological supervision and interpretation	88.38
70492	without contrast material followed by contrast material(s) and further sections	88.38	72156	Magnetic resonance (*proton) imaging, spinal canal and contents, without contrast material, followed by contrast material(s) and further sequences; cervical	88.93	76370	Computerized tomography guidance for placement of radiation therapy fields	88.38
70540	Magnetic resonance (*proton) imaging; orbit, face, and neck	88.97	72157	thoracic	88.93	76375	Computerized tomography, coronal, sagittal, multiplanar, oblique or three (3)-dimensional reconstruction, or any combination of these	88.38
70551	Magnetic resonance (*proton) imaging, brain (including brain stem); without contrast material	88.91	72158	lumbar	88.93	76380	Computerized tomography, limited or localized follow-up study	88.38
70552	with contrast material(s)	88.91	72192	Computerized axial tomography, pelvis; without contrast material	88.38	76400	Magnetic resonance (*proton) imaging, bone marrow blood supply	88.94
70553	without contrast material, followed by contrast material(s) and further sequences	88.91	72193	with contrast material(s)	88.38			
71250	Computerized axial tomography, thorax; without contrast material	87.41	72194	without contrast material, followed by contrast material(s) and further sections	88.38			
			72196	Magnetic resonance (*proton) imaging, pelvis	88.95			
			73200	Computerized axial tomography, upper extremity; without contrast material	88.38			
			73201	with contrast material(s)	88.38			

EXHIBIT B
Patient Abstract System
A-Record
(Master Record)

Field Name	Relative Position	Field Length	Format	Justify	Description
Record type	1	1	A	L	Constant "A"
Provider identifier	2-11	10	A/N	L	This field shall contain the National Provider Identifier (NPI), when assigned. Prior to NPI assignment, enter the Medicare provider number (or state assigned number).
Unique encounter identifier	12-31	20	A/N	L	Unique identifier within facility (hospital or ASC) for each discharge record or patient encounter.
Type of encounter	32	1	N	L	Type of encounter record 1 = Inpatient; 2 = Outpatient.
Place of service	33	1	N	L	For hospital inpatients 1 = Acute medical/surgical unit (non PPS exempt); 2 = Psychiatric unit or facility; 3 = Medical rehabilitation unit or facility; 4 = Alternate level of care (SNF/ICF/Other LTC/Hospice/Sub Acute/Swing bed); 5 = Alcohol rehabilitation unit or facility; 6 = Drug rehabilitation unit or facility; 7 = Other. For hospital outpatients 1 = Emergency room; 2 = Outpatient surgery; 3 = Observation only; 4 = Other. For ASC patients 2 = Outpatient surgery
Patient name	34-63	30	A/N	L	Not to be reported for patients receiving treatment for alcohol or drug abuse. Last name, first name and middle initial of the patient. Use a comma to separate last and first names. No space should be left between a prefix and a name as in MacBeth. Titles (for example, Sir, Msgr., Dr.) should not be recorded. Record hyphenated names with the hyphen, as in Smith-Jones, Rebecca. To record suffix, write the last name, leave a space and write the suffix, then write the first name as in Snyder III, Harold.
Patient Social Security Number	64-72	9	N	R	Not to be reported for patients receiving treatment for alcohol or drug abuse. If patient refuses, code as 999999999.
Patient birthdate	73-80	8	N	R	MMDDYYYY
Patient sex	81	1	A	L	Patient sex at time of admission or start of care: M = Male; F = Female; U = Unknown/indeterminate.
Patient ethnicity	82	1	N	L	1 = Hispanic or Latino 2 = Neither Hispanic nor Latino

Field Name	Relative Position	Field Length	Format	Justify	Description
Patient race	83	1	N	L	1 = White; 2 = Black or African American; 3 = American Indian/Alaska Native; 4 = Asian; 5 = Native Hawaiian/Pacific Islander; 6 = Some other race 7 = Multi-racial (two or more races) 9 = Unknown or patient refused
State of residence	84-85	2	N	R	FIPS codes (homeless = 97; non-U.S. citizen = 98)
Zip code	86-90	5	N	R	First five digits (homeless = 99997; non-U.S. citizen = 99998)
County code	91-93	3	N	R	Required for Missouri residents. Use FIPS codes (homeless = 997; non-U.S. citizen = 998)
Census tract	94-100	7	A/N	L	Census Tract code: 7 characters, formatted XXXX.XX (where X is a digit 0-9) If census tract is not available, provide patient address information on the C-Record.
Admission date	101-108	8	N	R	MMDDYYYY
Admission hour	109-110	2	N	R	Required for inpatient records only 00 = 12:00-12:59 Midnight; 01 = 1:00-1:59 02 = 2:00-2:59 03 = 3:00-3:59 04 = 4:00-4:59 05 = 5:00-5:59 06 = 6:00-6:59 07 = 7:00-7:59 08 = 8:00-8:59 09 = 9:00-9:59 10 = 10:00-10:59 11 = 11:00-11:59 12 = 12:00-12:59 Noon; 13 = 1:00-1:59 14 = 2:00-2:59 15 = 3:00-3:59 16 = 4:00-4:59 17 = 5:00-5:59 18 = 6:00-6:59 19 = 7:00-7:59 20 = 8:00-8:59 21 = 9:00-9:59 22 = 10:00-10:59 23 = 11:00-11:59 99 = Unknown
Type of admission	111	1	N	L	Required for inpatient records only 1 = Emergency—The patient requires immediate intervention as a result of severe, life threatening or potentially disabling conditions; 2 = Urgent/Elective—(UB-92 codes 2 and 3); 4 = Newborn—Use of this code requires special source of admission codes for newborns.

Field Name	Relative Position	Field Length	Format	Justify	Description
Source of admission/referral	112	1	N	L	<p>Code Structure for Adult/Pediatric Patients:</p> <p>1 = Direct admission or referral (UB-92 codes, 1, 2 and 3). The patient was admitted to this facility or referred for services upon the recommendation of a physician, or the facility's clinic or outpatient department. For emergency room patients, includes self-referral;</p> <p>2 = Transfer from other hospital (UB-92 Code 4). The patient was transferred for services to this facility or referred from an acute-care facility;</p> <p>3 = Transfer from long-term care facility (UB-92 codes to 5 and 6). The patient was transferred from or referred for services by an SNF or other long-term facility;</p> <p>4 = Emergency room admission or referral (UB-92 code 7). The patient was admitted to this facility or referred for outpatient services through the emergency room;</p> <p>8 = Other (UB-92 code 8);</p> <p>9 = Unknown/Information not available.</p> <p>Code Structure for Newborns:</p> <p>1 = Normal birth—A baby delivered without complications;</p> <p>2 = Premature birth—A baby delivered with time or weight factors, or both, qualifying it for premature status;</p> <p>3 = Sick baby—A baby delivered with medical complications other than those related to premature status;</p> <p>4 = Extramural birth—A newborn born in a nonsterile environment;</p> <p>9 = Information not available.</p>
Discharge Date	113-120	8	N	R	MMDDYYYY
Discharge hour	121-122	2	N	R	<p>Required for inpatient records only</p> <p>00 = 12:00-12:59 Midnight;</p> <p>01 = 1:00-1:59</p> <p>02 = 2:00-2:59</p> <p>03 = 3:00-3:59</p> <p>04 = 4:00-4:59</p> <p>05 = 5:00-5:59</p> <p>06 = 6:00-6:59</p> <p>07 = 7:00-7:59</p> <p>08 = 8:00-8:59</p> <p>09 = 9:00-9:59</p> <p>10 = 10:00-10:59</p> <p>11 = 11:00-11:59</p> <p>12 = 12:00-12:59 Noon;</p> <p>13 = 1:00-1:59</p> <p>14 = 2:00-2:59</p> <p>15 = 3:00-3:59</p> <p>16 = 4:00-4:59</p> <p>17 = 5:00-5:59</p> <p>18 = 6:00-6:59</p> <p>19 = 7:00-7:59</p> <p>20 = 8:00-8:59</p> <p>21 = 9:00-9:59</p> <p>22 = 10:00-10:59</p> <p>23 = 11:00-11:59</p> <p>99 = Unknown.</p>
Observation units	123-125	3	N	R	The number of hours spent by a patient held for observation

Field Name	Relative Position	Field Length	Format	Justify	Description
Disposition of patient	126-127	2	N	R	Designation of the circumstances associated with the patient's discharge. 01 = Discharged to home or self-care (routine discharge); 02 = Discharged/transferred to another short-term general hospital for inpatient care; 03 = Discharged/transferred to skilled nursing facility (SNF); 04 = Discharged/transferred to an intermediate care facility (ICF); 05 = Discharged/transferred to another type of institution for inpatient care or referred for outpatient services to another institution; 06 = Discharged/transferred to home under care of organized home health service organization; 07 = Left against medical advice or discontinued care; 08 = Discharged/transferred to home under care of a Home IV provider; 09 = Admitted as an inpatient to this hospital; 20 = Expired
Medical/Health record number	128-144	17	A/N	L	Number assigned to the patient's medical/health record by the provider
E-Code External cause of injury	145-149	5	A/N	L	The ICD-9-CM code for the external cause of injury, poisoning or adverse effect. If more than one E-Code, enter the first E-Code, according to coding guidelines. Required when either the Principal diagnosis code or Other diagnosis code reported is in the range 800.00-999.99
Place of injury code	150-154	5	A/N	L	The ICD-9-CM code for the place of injury reported in the External cause of injury field. Use when External Cause of Injury E-Code is E850 - E869 or E880-E928. Only codes in range E849.0-E849.9 are valid.
Principal diagnosis code	155-159	5	A/N	L	ICD-9-CM code. (Note: An E-Code is invalid as a principal diagnosis.)
Other diagnosis codes	160-199	40 (8 X 5)	A/N	L	ICD-9-CM code. Include any additional E-Codes not reported in the E-code or Place of injury fields.
Procedure coding method used	200	1	N	L	4 = CPT-4 5 = HCPCS 9 = ICD-9-CM
Principal procedure code/date Code Date	201-215	15 (7) (8)	A/N N	L	ICD-9-CM code or CPT-4 code MMDDYYYY
Other procedure codes and dates Code Date	216-290	75 (5 X 15) (7) (8)	A/N N	L	All significant procedures are to be reported First 7 positions of each 15 position field: The ICD-9-CM code(s) or CPT-4 code(s) for the secondary procedures Next 8 positions of each 15 position field: MMDDYYYY

Field Name	Relative Position	Field Length	Format	Justify	Description
Total charges	291-297	7	N	R	Total charges (those associated with revenue code 001) rounded to the nearest dollar
Expected sources of payment	298-306	9 (3 X 3)	N	L	<p>Payment sources expected to pay for the hospitalization or the ambulatory service being recorded, with the primary payer listed first:</p> <p>001 = Medicare, not managed care; 002 = Medicaid, not managed care; 003 = Other government, not managed care; 005 = Workers' Compensation, not managed care; 006 = Self pay; 007 = All commercial payers, not managed care; 008 = No charge; 010 = Other, not managed care; 101 = Medicare managed care; 102 = Medicaid managed care; 103 = Other government managed care; 105 = Workers' Compensation managed care; 107 = All commercial payers managed care; 110 = Other managed care; 999 = Unknown</p>
Attending physician ID	307-316	10	A/N	L	This field shall contain the National Provider Identifier (NPI) , when assigned, of the physician who has primary responsibility for the patient's medical care and treatment. Prior to NPI assignment, enter the Unique Physician Identification Number (UPIN), or if no UPIN, enter the Missouri license number. All entries must be left-justified.
Principal procedure physician ID	317-326	10	A/N	L	This field shall contain the National Provider Identifier (NPI) , when assigned, of the physician who performed the principal procedure. Prior to NPI assignment, enter the Unique Physician Identification Number (UPIN), or if no UPIN, enter the Missouri license number. All entries must be left-justified.

**B-Record
(Continuation Record)****To be used when there are more diagnoses and/or procedures than will fit on the A-Record**

Field Name	Relative Position	Field Length	Format	Justify	Description
Record type	1	1	A	L	Constant "B"
Provider identifier	2-11	10	A/N	L	This field shall contain the National Provider Identifier (NPI), when assigned. Prior to NPI assignment, enter the Medicare provider number (or state assigned number).
Unique encounter identifier	12-31	20	A/N	L	Unique identifier within facility (hospital or ASC) for each discharge record or patient encounter.
Other diagnosis codes	32-101	70 (14x5)	A/N	L	ICD-9CM Code
Additional procedures Procedure code	102-311	210 (14X15) (7)	A/N	L	First 7 positions of each 13 position field: The ICD-9CM Code(s) or CPT-4 code(s) for the other procedures
Procedure date		(8)	N	R	Next 6 positions of each 13 position field: MMDDYYYY
Filler	312-326	15			Spaces

**C-Record
(Continuation Record)****To be used when census tract information is not available**

Field Name	Relative Position	Field Length	Format	Justify	Description
Record type	1	1	A	L	Constant "C"
Provider identifier	2-11	10	A/N	L	This field shall contain the National Provider Identifier (NPI), when assigned. Prior to NPI assignment, enter the Medicare provider number (or state assigned number).
Unique encounter identifier	12-31	20	A/N	L	Unique identifier within facility (hospital or ASC) for each discharge record or patient encounter.
Residence Address Line 1	32-61	30	A/N	L	Free form address line
Residence Address Line 2	62-91	30	A/N	L	Free form address line
City	92-107	16	A/N	L	Name of city or town of residence
Zip code	108-112	5	N	R	First five digits of zip code
Filler	113-326	214			Spaces

AUTHORITY: section 192.667, RSMo [Supp. 1997] 2000. Emergency rule filed Nov. 4, 1992, effective Nov. 14, 1992, expired March 13, 1993. Emergency rule filed March 4, 1993, effective March 14, 1993, expired July 11, 1993. Original rule filed Nov. 4, 1992, effective June 7, 1993. Emergency amendment filed April 1, 1993, effective April 11, 1993, expired Aug. 8, 1993. Emergency amendment filed Aug. 10, 1993, effective Aug. 20, 1993, expired Nov. 18, 1993. Amended: Filed April 1, 1993, effective Dec. 9, 1993. Amended: Filed May 15, 1998, effective Nov. 30, 1998. Emergency amendment filed March 1, 2001, effective April 1, 2001, expires Jan. 10, 2002. Amended: Filed April 13, 2001.

PUBLIC COST: This proposed amendment will cost state agencies or political subdivisions \$477,000 in the aggregate for the first year of reporting. This is a one-time cost.

PRIVATE COST: This proposed amendment will cost private entities \$1,260,500 in the aggregate for the first year of reporting and \$25,000 for each subsequent reporting year.

*NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Missouri Department of Health, Center for Health Information Management and Epidemiology, Garland Land, Director, PO Box 570, Jefferson City, MO 65102, (573) 751-6272. To be considered, comments must be received within thirty days following the publication of this notice in the **Missouri Register**. No public hearing is scheduled.*

**FISCAL NOTE
PUBLIC ENTITY COST****I. RULE NUMBER**

Title: 19 - Department of Health

Division: 10 - Office of the Director

Chapter: 33 - Hospital and Ambulatory Surgical Center Data Disclosure

Type of Rule Making: Proposed Amendment

Rule Number and Name: 19 CSR 10-33.010 Reporting Patient Abstract Data by Hospitals and Ambulatory Surgical Centers

II. SUMMARY OF FISCAL IMPACT

Affected Agency or Political Subdivision	Estimated Cost of Compliance in the Aggregate
	First Year (one -time) Cost
City hospitals	\$ 77,000
County hospitals	\$241,000
Hospital district hospitals	\$135,500
State hospitals	\$ 23,500
	Total First Year Cost
	\$477,000

III. WORKSHEET

Fiscal information was based on estimates provided by facilities, data vendors and the Hospital Industry Data Institute. The estimate in the aggregate was calculated as follows: (See Attachment)

IV. ASSUMPTIONS

1. Programming costs for changes to the file lay-out and data fields are one-time charges. These costs will vary depending on whether the facility: a) is part of a health system with shared data services, b) handles data services internally or c) contracts with an external data vendor.

It is estimated that approximately 70% of the independent (non-health system) facilities handle data internally; the remainder contract with an external data vendor.

The following multipliers were used to calculate the aggregate estimated costs for the required programming changes:

Health systems	\$13,500 per each
Independent hospitals (internal data services)	\$ 5,000 per each
Independent hospitals (external data vendor)	\$13,500 per each

2. It is assumed that facilities may need to create and implement new forms to capture the revised fields for race and ethnicity. The multiplier used to calculate the aggregate estimated costs for form changes and implementation is as follows:

Hospitals	\$ 5,000 per each
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3. Place of injury codes are not new data elements, however the revised lay-out requires that these codes be placed in a separate field from the other E-codes (external cause of injury codes). This change will be part of the programming and file lay-out changes and as such, will involve no additional costs.
4. Facilities have the option of providing address information or the census tract code equivalent. Those facilities that elect to provide the address information will not bear any cost for geo-coding. Facilities that report through the Hospital Industry Data Institute (HIDI) will submit the census tract equivalent codes in lieu of the address information. HIDI estimates that the geo-coding will cost \$20,000-30,000 per year. The mid-point figure of \$25,000 per annum was used as a private entity cost in the Private Entity Fiscal Note.

**III. Worksheet for Public Entity Fiscal Note
(Proposed Rule Amendment 19 CSR 10 – 33.010)****Summary Totals: All Public Entities**

<u>Cost Category</u>	<u>Entity Category</u>	<u>Units</u>	<u>Unit Cost</u>	<u>Total</u>
Programming/ File-lay-out Changes	Health Systems	1	\$13,500	\$ 13,500
	Independent Hospitals (internal data services)	25	\$ 5,000	\$125,000
	Independent Hospitals (external data vendor)	11	\$13,500	\$148,500
<u>Subtotal</u>				<u>\$287,000</u>
Form Changes and Implementation	Public Hospitals	38	\$ 5,000	<u>\$190,000</u>
<u>TOTAL</u>				<u>\$477,000</u>

City Hospitals

<u>Cost Category</u>	<u>Entity Category</u>	<u>Units</u>	<u>Unit Cost</u>	<u>Total</u>
Programming/ File-lay-out Changes	Independent Hospitals (internal data services)	4	\$ 5,000	\$ 20,000
	Independent Hospitals (external data vendor)	2	\$13,500	\$ 27,000
<u>Subtotal</u>				<u>\$ 47,000</u>
Form Changes and Implementation	City Hospitals	6	\$ 5,000	<u>\$ 30,000</u>
<u>TOTAL</u>				<u>\$ 77,000</u>

County Hospitals

<u>Cost Category</u>	<u>Entity Category</u>	<u>Units</u>	<u>Unit Cost</u>	<u>Total</u>
Programming/ File-lay-out Changes	Independent Hospitals (internal data services)	13	\$ 5,000	\$ 65,000
	Independent Hospitals (external data vendor)	6	\$13,500	\$ 81,000
<u>Subtotal</u>				<u>\$146,000</u>
Form Changes and Implementation	County Hospitals	19	\$ 5,000	<u>\$ 95,000</u>
<u>TOTAL</u>				<u>\$241,000</u>

Hospital District Hospitals

<u>Cost Category</u>	<u>Entity Category</u>	<u>Units</u>	<u>Unit Cost</u>	<u>Total</u>
Programming/ File-lay-out Changes	Independent Hospitals (internal data services)	8	\$ 5,000	\$ 40,000
	Independent Hospitals (external data vendor)	3	\$13,500	\$ 40,500
<u>Subtotal</u>				<u>\$ 80,500</u>
Form Changes and Implementation	District Hospitals	11	\$ 5,000	<u>\$ 55,000</u>
TOTAL				<u>\$135,500</u>

State Hospitals

<u>Cost Category</u>	<u>Entity Category</u>	<u>Units</u>	<u>Unit Cost</u>	<u>Total</u>
Programming/ File-lay-out Changes	Health System* (internal data services)	1	\$13,500	\$ 13,500
<u>Subtotal</u>				<u>\$ 13,500</u>
Form Changes and Implementation	State Hospitals	2	\$ 5,000	<u>\$ 10,000</u>
TOTAL				<u>\$ 23,500</u>

*Represents University Hospital and Clinics (consisting of the main campus, Ellis Fischel and Columbia Regional facilities) and Missouri Rehabilitation Center. Costs for form changes and implementation were calculated separately for UHC and Missouri Rehabilitation Center.

**FISCAL NOTE
PRIVATE ENTITY COST**

I. RULE NUMBER

Title: 19 -Department of Health
Division: 10 - Office of the Director
Chapter: 33 – Hospital and Ambulatory Surgical Center Data Disclosure
Type of Rule Making: Proposed Amendment
Rule Number and Name: 19 CSR 10-33.010 Reporting Patient Abstract Data by Hospitals and Ambulatory Surgical Centers

II. SUMMARY OF FISCAL IMPACT

Estimate of the number of entities by class which would likely be affected by the adoption of the proposed rule:	Classification by type of the business entities which would likely be affected:	Estimate in the aggregate as to the cost of compliance with the rule by the affected entities.	
		<u>Year One</u>	<u>Annual (After Year One)</u>
11	Health systems	\$ 411,500	-0-
46	Independent private hospitals	\$ 579,000	-0-
38	Independent ambulatory Surgery centers (ASCs)	\$ 245,000	-0-
1	Health data organization	\$ 25,000	\$25,000
		<u>Year One Total (One-Time Cost)</u>	
		\$1,260,500	

III. WORKSHEET

Fiscal information was based on estimates provided by facilities, data vendors and the Hospital Industry Data Institute. The estimate in the aggregate was calculated as follows: (See Attachment)

IV. ASSUMPTIONS

1. Programming costs for changes to the file lay-out and data fields are one-time charges. These costs will vary depending on whether the facility: a) is part of a health system with shared data services, b) handles data services internally or c) contracts with an external data vendor.

Costs also vary by the facility type. Hospitals submit higher volume and more complex data records than do ambulatory surgery centers.

It is estimated that approximately 70% of the independent (non-health system) facilities handle data internally; the remainder contract with an external data vendor.

The following multipliers were used to calculate the aggregate estimated costs for the required programming changes:

Health systems	\$13,500 per each
Independent hospitals (internal data services)	\$ 5,000 per each
Independent hospitals (external data vendor)	\$ 13,500 per each
Ambulatory surgery centers (internal data services)	\$ 3,000 per each
Ambulatory surgery centers (external data vendor)	\$ 8,000 per each

- It is assumed that facilities may need to create new forms to capture the revised fields for race and ethnicity. Costs to implement the form changes will vary by facility type, with hospitals incurring somewhat higher costs, due to greater volume and a more complex organization structure. The multipliers used to calculate the aggregate estimated costs for form changes and implementation are as follows:

Hospitals	\$ 5,000 per each
Ambulatory surgery centers	\$ 2,000 per each

- Place of injury codes are not new data elements, however the revised lay-out requires that these codes be placed in a separate field from the other E-codes (external cause of injury codes). This change will be part of the programming and file lay-out changes and as such, will involve no additional costs.
- Facilities have the option of providing address information or the census tract equivalent. Those facilities that elect to provide the address information will not bear any cost for geo-coding. Facilities that report through the Hospital Industry Data Institute (HIDI) will submit the census tract equivalent codes in lieu of the address information. HIDI estimates that the geo-coding will cost \$20,000-30,000 per year. The mid-point of \$25,000 was used for the aggregate calculation.

**III. Worksheet for Private Entity Fiscal Note
(Proposed Rule Amendment 19 CSR 10 – 33.010)**

A. Year One

1. Summary Totals: All Private Entities

<u>Cost Category</u>	<u>Entity Category</u>	<u>Units</u>	<u>Unit Cost</u>	<u>Total</u>
Programming/ File-lay-out Changes	Health Systems	11	\$13,500	\$148,500
	Independent Hospitals (internal data services)	32	\$ 5,000	\$160,000
	Independent Hospitals (external data vendor)	14	\$13,500	\$189,000
	Amb. Surgery Centers (internal data services)	27	\$ 3,000	\$ 81,000
	Amb. Surgery Centers (external data vendor)	11	\$ 8,000	\$ 88,000
<u>Subtotal</u>				<u>\$666,500</u>
Form Changes and Implementation	Private Hospitals	95	\$ 5,000	\$475,000
	Amb. Surgery Centers	47	\$ 2,000	\$ 94,000
<u>Subtotal</u>				<u>\$569,000</u>
Census Tract Geo-coding	Hospital Industry Data Institute	1	\$25,000	<u>\$ 25,000</u>
<hr/> TOTAL				<hr/> <u>\$1,260,500</u>

2. Summary Totals by Type of Private Entity**Health Systems**

<u>Cost Category</u>	<u>Entity Category</u>	<u>Units</u>	<u>Unit Cost</u>	<u>Total</u>
Programming/ File-lay-out Changes	Health Systems	11	\$13,500	\$148,500
<u>Subtotal</u>				<u>\$148,500</u>
Form Changes and Implementation	Within-System Hospitals	49	\$ 5,000	\$245,000
	Within-System ASCs	9	\$ 2,000	\$ 18,000
<u>Subtotal</u>				<u>\$263,000</u>
<hr/>				
TOTAL				\$411,500

Independent Private Hospitals

<u>Cost Category</u>	<u>Entity Category</u>	<u>Units</u>	<u>Unit Cost</u>	<u>Total</u>
Programming/ File-lay-out Changes	Independent Hospitals (internal data services)	32	\$ 5,000	\$160,000
	Independent Hospitals (external data vendor)	14	\$ 13,500	\$189,000
<u>Subtotal</u>				<u>\$349,000</u>
Form Changes and Implementation	Private Hospitals	46	\$ 5,000	\$230,000
<hr/>				
TOTAL				\$579,000

Independent Ambulatory Surgery Centers (ASCs)

<u>Cost Category</u>	<u>Entity Category</u>	<u>Units</u>	<u>Unit Cost</u>	<u>Total</u>
Programming/ File-lay-out Changes	Amb. Surgery Centers (internal data services)	27	\$ 3,000	\$ 81,000
	Amb. Surgery Centers (external data vendor)	11	\$ 8,000	\$ 88,000
<u>Subtotal</u>				<u>\$169,000</u>
Form Changes and Implementation	Amb. Surgery Centers	38	\$ 2,000	\$ 76,000
<u>Subtotal</u>				<u>\$ 76,000</u>
<hr/>				
TOTAL				<u>\$245,000</u>

Health Data Organization(s)

<u>Cost Category</u>	<u>Entity Category</u>	<u>Units</u>	<u>Unit Cost</u>	<u>Total</u>
Census Tract Geo-coding	Hospital Industry Data Institute	1	\$25,000	<u>\$ 25,000</u>
<hr/>				
TOTAL				<u>\$ 25,000</u>
<hr/>				
GRAND TOTAL-Year One				\$1,260,500

B. Annual Costs After Year One

<u>Cost Category</u>	<u>Entity Category</u>	<u>Units</u>	<u>Unit Cost</u>	<u>Total</u>
Census Tract Geo-coding	Hospital Industry Data Institute	1	\$25,000	<u>\$ 25,000</u>
TOTAL				<u>\$ 25,000</u>

**Title 19—DEPARTMENT OF HEALTH
Division 10—Office of the Director
Chapter 33—Hospital and Ambulatory Surgical Center
Data Disclosure**

PROPOSED AMENDMENT

19 CSR 10-33.020 Reporting Charges for Leading Diagnoses and Procedures by Hospitals and Ambulatory Surgical Centers. The department proposes to amend this rule by amending section (1) to move Exhibit C from the conclusion of all the rules in this chapter to the conclusion of this rule.

PURPOSE: This amendment is to move Exhibit C from the conclusion of all the rules in this chapter to the conclusion of this rule.

(1) Hospitals and ambulatory surgical centers shall report to the Department of Health by March 1 of each year, the charges as of December 31 of the previous year for the diagnoses and procedures listed in Exhibit C of this rule, **included herein**.

EXHIBIT C

List of Diagnoses and Procedures List of Inpatient Diagnoses

Cesarean section without complications or comorbidities, or both

Four-day stay

DRG 371

Vaginal delivery without complicating diagnoses

Two-day stay

DRG 373

Normal newborn

Two-day stay

DRG 391

List of Outpatient Procedures*

Operations on the Nervous System

Epidural pain block

CPT-4 62278 Injection of anesthetic substance (including narcotics), diagnostic or therapeutic; lumbar or caudal epidural, single

ICD-9 03.91 Injection of anesthetic into spinal canal for analgesia

Carpal tunnel release

CPT-4 64721 Neuroplasty or transposition, or both; median nerve at carpal tunnel

ICD-9 04.43 Release of carpal tunnel

Operations on the Eye

Radial keratotomy (surgical correction of myopia)

CPT-4 65771 Radial keratotomy

ICD-9 11.75 Radial keratotomy

Cataract removal, with intraocular lens implant

CPT-4 66983 Intracapsular cataract extraction with insertion of intraocular lens prosthesis (one stage procedure)

CPT-4 66984 Extracapsular cataract removal with insertion of intraocular lens prosthesis (one stage procedure), manual or mechanical technique (for example, irrigation and aspiration or phacoemulsification)

ICD-9 13.19 Other intracapsular extraction of lens, plus

ICD-9 13.71 Insertion of intraocular lens prosthesis at time of cataract extraction, one (1) stage

ICD-9 13.59 Other extracapsular extraction of lens, plus

ICD-9 13.71 Insertion of intraocular lens prosthesis at time of cataract extraction, one (1) stage

Removal of secondary cataract

CPT-4 66821 Discussion of secondary membranous cataract (opacified posterior lens capsule, anterior haloid, or both); laser surgery (for example, YAG laser) (one (1) or more stages)

ICD-9 13.64 Discussion of secondary membrane (after cataract)

Secondary insertion of intraocular lens/Exchange of intraocular lens

CPT-4 66985 Insertion of intraocular lens prosthesis (secondary implant), not associated with concurrent cataract removal

CPT-4 66986 Exchange of intraocular lens

ICD-9 13.72 Secondary insertion of intraocular lens prosthesis

Operations on the Ear, Nose, Mouth and Pharynx

Myringotomy, with or without tubes

CPT-4 69421 Myringotomy including aspiration or eustachian tube inflation, or both, requiring general anesthesia

CPT-4 69436 Tympanostomy (requiring insertion of ventilating tube), general anesthesia

ICD-9 20.01 Myringotomy with insertion of tube

Nasal fracture, closed reduction

CPT-4 21320 Manipulative treatment, nasal bone fracture; with stabilization

ICD-9 21.71 Closed reduction of nasal fracture

Septoplasty

CPT-4 30520 Septoplasty or submucous resection, with or without cartilage scoring, contouring or replacement with graft

ICD-9 21.88 Other septoplasty

Tonsillectomy without adenoidectomy

CPT-4 42825 Tonsillectomy, primary or secondary; under age 12

CPT-4 42826 age 12 or over

ICD-9 28.2 Tonsillectomy without adenoidectomy

Tonsillectomy with adenoidectomy

CPT-4 42820 Tonsillectomy and adenoidectomy; under age 12

CPT-4 42821 age 12 or over

ICD-9 28.3 Tonsillectomy with adenoidectomy

Operations on the Cardiovascular System

Cardiac catheterization, left heart

- CPT-4 93510 Left heart catheterization, retrograde, from the brachial artery, axillary artery or femoral artery; percutaneous
- CPT-4 93511 by cutdown
- CPT-4 93514 Left heart catheterization by left ventricular puncture
- CPT-4 93524 Combined transseptal and retrograde left heart catheterization
- ICD-9 37.22 Left heart cardiac catheterization

Varicose vein ligation and stripping

- CPT-4 37720 Ligation and division and complete stripping of long or short saphenous veins
- ICD-9 38.5 Ligation and stripping of varicose veins

Endoscopic Procedures

Bronchoscopy, diagnostic

- CPT-4 31622 Bronchoscopy; diagnostic, (flexible or rigid), with or without cell washing or brushing
- ICD-9 33.22 Fiber-optic bronchoscopy
- ICD-9 33.23 Other bronchoscopy

Dilation of esophagus

- CPT-4 43455 Dilation of esophagus, by balloon or dilator; under fluoroscopic guidance
- CPT-4 43456 retrograde
- ICD-9 42.92 Dilation of esophagus

Upper GI endoscopy, diagnostic

- CPT-4 43235 Upper gastrointestinal endoscopy including esophagus, stomach and either the duodenum, jejunum, or both, as appropriate; complex diagnostic
- ICD-9 44.13 Other endoscopy of small intestine

Endoscopy of small intestine, diagnostic

- CPT-4 44360 Small intestinal endoscopy, enteroscopy beyond second portion of duodenum; diagnostic
- ICD-9 45.13 Other endoscopy of small intestine

Colonoscopy, diagnostic

- CPT-4 45378 Colonoscopy, fiber-optic, beyond splenic flexure; diagnostic, with or without colon decompression
- ICD-9 45.23 Colonoscopy

Sigmoidoscopy, diagnostic

- CPT-4 45330 Sigmoidoscopy, flexible fiber-optic; diagnostic
- ICD-9 45.24 Flexible sigmoidoscopy

Operations on the Digestive System

Cholecystectomy (gall bladder removal)

- CPT-4 49310 Laparoscopy, surgical; cholecystectomy (any method)
- ICD-9 51.23 Laparoscopic cholecystectomy

Inguinal hernia repair

- CPT-4 49500 Repair inguinal hernia, under age 5 years, with or without hydrocelectomy
- CPT-4 49505 Repair inguinal hernia, age 5 or over
- ICD-9 53.00 Unilateral repair of inguinal hernia, not otherwise specified
- ICD-9 53.01 Repair of direct inguinal hernia
- ICD-9 53.02 Repair of indirect inguinal hernia

Diagnostic laparoscopy

- CPT-4 58980 Laparoscopy, diagnostic (separate procedure)
- ICD-9 54.21 Laparoscopy

Cystoscopy

- CPT-4 52000 Cystourethroscopy (separate procedure)
- ICD-9 57.32 Other cystoscopy

Sterilization

Vasectomy

- CPT-4 55250 Vasectomy, unilateral or bilateral (separate procedure), including postoperative semen examination(s)
- ICD-9 63.73 Vasectomy

Tubal ligation

- CPT-4 58982 Laparoscopy, surgical; with fulguration of oviducts (with or without transection)
- CPT-4 58983 with occlusion of oviducts by device (for example, band, clip, or Falope ring)
- ICD-9 66.21 Bilateral endoscopic ligation and crushing of fallopian tubes
- ICD-9 66.22 Bilateral endoscopic ligation and division of fallopian tubes
- ICD-9 66.29 Other bilateral endoscopic destruction or occlusion of fallopian tubes

Gynecological Operations

Conization of cervix

CPT-4 57520 Conization of cervix, with or without fulguration, with or without dilation and curettage, with or without repair (any method)

ICD-9 67.2 Conization of cervix

Laser destruction of cervical lesion

CPT-4 57513 Cauterization of cervix; laser ablation

ICD-9 67.39 Other excision or destruction of lesion or tissue of cervix

Diagnostic D & C

CPT-4 58120 Dilation and curettage, diagnostic therapeutic (nonobstetrical), or both

ICD-9 69.09 Other dilation and curettage

Operations on the Musculoskeletal System

Bunionectomy

CPT-4 28110 Osteotomy, partial excision, fifth metatarsal head (bunionette) (separate procedure)

CPT-4 28290 Hallux valgus (bunion) correction, with or without sesamoidectomy; simple exostectomy (Silver type procedure)

CPT-4 28292 Keller, McBride or Mayo type procedure

CPT-4 28293 resection of joint with implant

CPT-4 28294 with tendon transplants (Joplin type procedure)

CPT-4 28296 with metatarsal osteotomy (for example, Mitchell, Chevron, or concentric type procedures)

CPT-4 28297 Lapidus type procedure

CPT-4 28298 by phalanx osteotomy

CPT-4 28299 by other methods (for example, double osteotomy)

ICD-9 77.51 Bunionectomy with soft tissue correction and osteotomy of the first metatarsal

ICD-9 77.52 Bunionectomy with soft tissue correction and arthrodesis

ICD-9 77.53 Other bunionectomy with soft tissue correction

ICD-9 77.54 Excision or correction of bunionette

ICD-9 77.57 Repair of claw toe

ICD-9 77.58 Other excision, fusion and repair of toes

ICD-9 77.59 Other bunionectomy

Hammertoe correction

CPT-4 28285 Hammertoe operation; one toe (for example, interphalangeal fusion, filleting, phalangectomy)

ICD-9 77.56 Repair of hammertoe

Knee arthroscopy, diagnostic

CPT-4 29870 Arthroscopy, knee, diagnostic, with or without synovial biopsy (separate procedure)

ICD-9 80.26 Arthroscopy, knee

ICD-9 80.36 Biopsy of joint structure, knee

Knee arthroscopy, removal of cartilage

CPT-4 29881 Arthroscopy, knee, surgical; with meniscectomy (medial OR lateral including any meniscal shaving)

ICD-9 80.6 Excision of semilunar cartilage of knee

Ganglionectomy, hand or wrist

CPT-4 25111 Excision of ganglion, wrist (dorsal or volar); primary

CPT-4 26160 Excision of lesion of tendon sheath or capsule (for example, cyst, mucous cyst, or ganglion), hand or finger

ICD-9 82.21 Excision of lesion of tendon sheath of hand

Operations on the Integumentary System

Breast biopsy, incisional

CPT-4 19101 Biopsy of breast; incisional

ICD-9 85.12 Open biopsy of breast

Removal of breast lesion

CPT-4 19120 Excision of cyst, fibroadenoma, or other benign or malignant tumor, aberrant breast tissue, duct lesion or nipple lesion (except 19140), male or female, one or more lesions

ICD-9 85.21 Local excision of lesion of breast

Miscellaneous Diagnostic and Therapeutic Procedures

CAT scan of head, without contrast

CPT-4 70450 Computerized axial tomography, head or brain; without contrast material

ICD-9 87.03 Computerized axial tomography of head

CAT scan of head, with and without contrast

CPT-4 70470 Computerized axial tomography, head or brain; without contrast material, followed by contrast material(s) and further sections

ICD-9 87.03 Computerized axial tomography of head

Contrast myelogram of spine

CPT-4 61055 Cisternal or lateral cervical (C1-C2) puncture; with injection of drug or other substance for diagnosis or treatment (C1-C2) or

CPT-4 62284 Injection procedure for myelography or computerized axial tomography, or both, spinal (other than C1-C2 and posterior fossa), plus

CPT-4 72270 Myelography, entire spinal canal, radiological supervision and interpretation

ICD-9 87.21 Contrast myelogram

Mammography

CPT-4 76092 Screening mammography, bilateral (two view film study of each breast)

ICD-9 87.37 Other mammography (X-ray imaging of the breast, other than xerography)

CAT scan of abdomen, without contrast

CPT-4 74150 Computerized axial tomography, abdomen; without contrast material

ICD-9 88.01 Computerized axial tomography of abdomen

CAT scan of abdomen, with and without contrast

CPT-4 74170 Computerized axial tomography, abdomen; without contrast material, followed by contrast material(s) and further sections

ICD-9 88.01 Computerized axial tomography of abdomen

Diagnostic ultrasound, abdomen and retroperitoneum

CPT-4 76700 Echography, abdominal, B-scan or real time with image documentation, or both; complete

CPT-4 76770 Echography, retroperitoneal (for example, renal, aorta, nodes), B-scan or real time with image documentation, or both; complete

ICD-9 88.76 Diagnostic ultrasound of abdomen and retroperitoneum

Diagnostic ultrasound, gravid uterus

CPT-4 76805 Echography, pregnant uterus, B-scan or real time with image documentation, or both; complete (complete fetal and maternal evaluation)

CPT-4 76810 complete (complete fetal and maternal evaluation), multiple gestation, after the first trimester

ICD-9 88.78 Diagnostic ultrasound of gravid uterus

Magnetic resonance imaging, brain, without contrast

CPT-4 70551 Magnetic resonance (for example, proton) imaging, brain (including brain stem); without contrast material

ICD-9 88.91 Magnetic resonance imaging of brain and brain stem

Magnetic resonance imaging, brain, with and without contrast

CPT-4 70553 Magnetic resonance (for example, proton) imaging, brain (including brain stem); without contrast material, followed by contrast material(s) and further sequences

ICD-9 88.91 Magnetic resonance imaging of brain and brain stem

Magnetic resonance imaging, spinal canal, without contrast

CPT-4 72141 Magnetic resonance (for example, proton) imaging, spinal canal and contents, cervical; without contrast material

CPT-4 72146 Magnetic resonance (for example, proton) imaging, spinal canal and contents, thoracic; without contrast material

CPT-4 72148 Magnetic resonance (for example, proton) imaging, spinal canal and contents, lumbar; without contrast material

ICD-9 88.93 Magnetic resonance imaging of spinal canal

Magnetic resonance imaging, spinal canal, with and without contrast

CPT-4 72156 Magnetic resonance (for example, proton) imaging, spinal canal and contents, without contrast material, followed by contrast material(s) and further sequences; cervical

CPT-4 72157 thoracic

CPT-4 72158 lumbar

ICD-9 88.93 Magnetic resonance imaging of spinal canal

Treadmill stress test

CPT-4 93015 Cardiovascular stress test using maximal or submaximal treadmill or bicycle exercise or pharmacological stress, or both;

continuous electrocardiographic monitoring, with interpretation and report

ICD-9 89.41 Cardiovascular stress test using treadmill

Electrocardiogram

CPT-4 93000 Electrocardiogram, routine ECG with at least 12 leads; with interpretation and report

ICD-9 89.52 Electrocardiogram

Extracorporeal shockwave lithotripsy, kidney, ureter or bladder, or any combination of these

CPT-4 50590 Lithotripsy, extracorporeal shockwave

ICD-9 98.51 Extracorporeal shock wave lithotripsy (ESWL) of the kidney, ureter or bladder, or any combination of these

*Charges for outpatient procedures shall include the facility's total customary charges for a specific procedure or group of procedures defined according to ICD-9-CM or CPT-4 codes. Charges shall include fees associated with the preparation of the patient (preoperative phase), performance of the procedure (intraoperative phase) and recovery (postoperative phase): Preoperative phase includes those services and procedures that prepare the patient for the surgical procedure. It shall include, but is not limited to, charges for standard preoperative diagnostic laboratory testing, radiological services, preparatory pharmaceuticals (preoperative medications), skin preparation supplies, and the like. Intraoperative phase includes those services and procedures during the period of time of the actual surgical procedure itself (as identified by ICD-9-CM or CPT-4 code) as performed to eliminate or improve the patient's diagnostic condition. It shall include, but is not limited to, room charges for the surgery suite, anesthesia and other intraoperative pharmaceuticals, equipment and supplies (drapes/barriers, electrocautery tips and grounding pads, specialized scalpel blades, dressing materials, casting materials and orthopedic supplies, and the like). Postoperative phase includes those services and procedures that are provided to the patient from the point at which the patient exits the surgery suite to the point at which the patient is discharged from the facility. It shall include, but is not limited to, charges for use of the recovery room, dressings, pharmaceuticals, respiratory therapy, supplies and the like. Professional fees for facility-based radiologists, pathologists, anesthesiologists and the like, if they are reported by the facility, shall be reported separately.

AUTHORITY: section 192.667, RSMo [Supp. 1992] 2000. Emergency rule filed Nov. 4, 1992, effective Nov. 14, 1992, expired March 13, 1993. Emergency rule filed March 4, 1993, effective March 14, 1993, expired July 11, 1993. Original rule filed Nov. 4, 1992, effective June 7, 1993. Emergency amendment filed April 1, 1993, effective April 11, 1993, expired Aug. 8, 1993. Emergency amendment filed Aug. 10, 1993, effective Aug. 20, 1993, expired Nov. 18, 1993. Amended: Filed April 1, 1993, effective Dec. 9, 1993. Amended: Filed April 13, 2001.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than \$500 in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than \$500 in the aggregate.

*NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Missouri Department of Health, Center for Health Information Management and Epidemiology, Garland Land, Director, PO Box 570, Jefferson City, MO 65102, (573) 751-6272. To be considered, comments must be received within thirty days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.*

Title 19—DEPARTMENT OF HEALTH

Division 10—Office of the Director

Chapter 33—Hospital and Ambulatory Surgical Center Data Disclosure

PROPOSED AMENDMENT

19 CSR 10-33.030 Reporting Financial Data by Hospitals. The department proposes to amend this rule by amending section (1) to move Exhibit D from the conclusion of all the rules in this chapter to the conclusion of this rule.

PURPOSE: This amendment is to relocate the Exhibit D from the conclusion of all the rules in this chapter to the conclusion of this rule.

(1) Hospitals shall report the financial data listed in Exhibit D of this rule, **included herein**, for the previous fiscal year to the Department of Health by April 15 of each year starting in 1993. If any data element has been submitted previously to the Division of Medical Services of the Department of Social Services, the hospital does not have to report that data to the Department of Health. The Department of Health shall notify each hospital what data elements are not available from the Division of Medical Services.

EXHIBIT D

Financial Data Elements

BALANCE SHEET*

1a.	Cash and cash equivalents	_____	
1b.	Net patient accounts receivable	_____	
1c.	Other current assets	_____	
1d.	Total current assets		_____
2a.	Fixed assets at cost	_____	
2b.	Less: accumulated depreciation	_____	
2c.	Fixed assets (net)		_____
3.	Other assets		_____
4.	Total assets		_____
5.	Current liabilities		_____
6.	Long-term debt		_____
7.	Other long-term liabilities		_____
8.	Fund balance		_____
9.	Total liabilities and fund balance		_____

INCOME STATEMENT**

1a.	Inpatient revenue	_____	
1b.	Outpatient revenue	_____	
1c.	Total gross patient revenue		_____
2a.	Charity care	_____	
2b.	Other allowances and deductions	_____	
2c.	Total deductions and allowances		_____
3.	Net patient revenue		_____
4.	Other revenue		_____
5.	Total revenue		_____
6a.	Payroll expenses	_____	
6b.	Employee benefits	_____	
6c.	Depreciation expense	_____	
6d.	Bad debt expense	_____	
6e.	All other operating expenses	_____	
6f.	Total operating expenses		_____
7.	Net income from operations		_____
8a.	Investment income	_____	
8b.	Contributions	_____	
8c.	Tax support and other subsidies	_____	
8d.	Miscellaneous gains and losses	_____	
8e.	Nonoperating gains and losses		_____
9.	Net income before extraordinary and other nonrecurring items		_____
10.	Extraordinary gains and losses		_____
11.	Net income		_____

SUPPLEMENTAL ITEMS***

1.	If depreciation is funded, balance at end of reporting period	_____
2a.	Medicare gross patient revenue	_____
2b.	Medicaid gross patient revenue	_____
2c.	Other government patient revenue	_____
2d.	Nongovernment patient revenue	_____

Definitions for Exhibit D

Balance Sheet*

- 1a. *Cash and cash equivalents* means money on hand, and includes money in checking accounts, time deposits, temporary cash investments and uninvested funds held by investment custodians.
- 1b. *Net patient accounts receivable* means accounts receivable, net of estimated uncollectibles.
- 1c. *Other current assets* means other accounts receivable, notes receivable and may include the current portion of assets whose use is limited, prepaid expenses, inventory and short-term investments.
- 1d. *Total current assets* means the sum of lines 1a. through 1c.
- 2a. *Fixed assets at cost* means land, land improvements, buildings and improvements, leasehold improvements, equipment (fixed and movable), leased property and equipment, and construction in progress, at cost.
- 2b. *Accumulated depreciation* means depreciation and amortization.
- 2c. *Fixed assets (net)* means fixed assets at cost (line 2a.) less accumulated depreciation (line 2b.).
3. *Other assets* means all other assets, and may include deferred financing costs, unamortized bond issue costs, investment in affiliated company, deferred third-party reimbursement and other assets.
4. *Total assets* means the sum of lines 1d., 2c. and 3.
5. *Current liabilities* means those which will be discharged with current assets, and may include notes payable to banks; the current portion of long-term debt; accounts payable; advances from and amounts payable to third-party payers for estimated and final reimbursement settlements; refunds to and deposits from patients and others; deferred revenue; accrued salaries and payroll taxes; and other accruals such as pension or profit-sharing contributions, compensated absences, and income and other taxes.
6. *Long-term debt* means notes payable, mortgages payable, capital leases, bonds payable and loans/contracts payable.
7. *Other long-term liabilities* means other long-term obligations, and may include estimated malpractice costs, deferred compensation payable, deferred third-party reimbursement and accrued pension/deferred pension liability.
8. *Fund balance* means the excess of assets over liabilities (net equity). An excess of liabilities over assets is reflected as a deficit.
9. *Total liabilities and fund balance* means the sum of lines 5.-8. Must agree with total assets, line 4.

Income Statement**

- 1a. *Inpatient revenue* means full hospital charges for all hospital services to inpatients.
- 1b. *Outpatient revenue* means full hospital charges for all hospital services to outpatients.
- 1c. *Total gross patient revenue* means the sum of lines 1a. and 1b. Full hospital charges for all hospital patient services before considering any deductions for charity care or contractual allowances.
- 2b. *Other allowances and deductions* means revenue deductions incurred in treating patients other than charity patients, including Medicare, Medicaid, other insured and uninsured patients. It includes courtesy discounts given to employees and others. It does not include bad debt expense, which is to be reported as an operating expense (line 6d.).
- 2c. *Total allowance and deductions* means the sum of lines 2a. and 2b.
3. *Net patient revenue* means total gross revenue (line 2.) less total allowances and deductions (line 2c.).
4. *Other revenue* means revenue from services other than health care provided to patients and residents, and includes sales and services to nonpatients. This revenue arises from the normal day-to-day operations of the health care entity. Other revenues may include: revenue such as gifts, grants, or endowment income restricted by donors to finance charity care; revenue from educational programs; revenue from research and other gifts and grants; revenue from miscellaneous sources, such as rental of facility space, sales of medical and pharmacy supplies, fees charged for transcripts for attorneys, insurance companies and others, proceeds from the sale of cafeteria meals and guest trays, proceeds from the sale of scrap, used X-ray film, and proceeds from sales at gift shops, snack bars, newsstands, parking lots, vending machines and other service facilities operated by the health care entity.
5. *Total revenue* means the sum of lines 3. and 4.
- 6a. *Payroll expenses* means salaries and wages paid to employees of the health care entity.
- 6b. *Employee benefits* means Social Security, group insurance, retirement benefits, Workers' Compensation, unemployment insurance and others.
- 6c. *Depreciation expense* means depreciation and amortization of property and equipment recorded for the reporting period.
- 6d. *Bad debt expense* means revenue amounts deemed uncollectible primarily because of a patient's unwillingness to pay as determined after collection efforts based upon sound credit and collection policies. It does not include charity care, which is to be reported on line 2a.
- 6e. *All other operating expenses* means expenses for professional fees, interest, supplies, purchased services, utilities, income taxes, operating losses and any other expenses not included in the above categories.
- 6f. *Total operating expenses* means the sum of lines 6a.–6e.
7. *Income from operations* means total revenue (line 5.) less total operating expenses (line 6f.).
- 8a. *Investment income* means return on investments of general funds, except that investment income and realized gains and losses on borrowed funds held by a trustee, investment income on malpractice trust funds and investment income that is essential to the ongoing major or central operations are included in other revenue (line 4.).
- 8b. *Contributions* means contributions, donations and bequests for general operating purposes from foundations, similar groups or individuals, or any combination of these.
- 8c. *Tax support and other subsidies* means tax levies and other subsidies from governmental or community agencies received for general support of the entity.
- 8d. *Miscellaneous gains and losses* means all other gains and losses from a provider's peripheral or incidental transactions, such as gain or loss on sale of health care entity properties; net rentals of facilities used in the operation of the entity; and term endowment funds that are available for general operating purposes upon termination of restrictions.
- 8e. *Nonoperating gains and losses* means the sum of lines 8a.–8d.
9. *Net income before extraordinary and other nonrecurring items* means the sum of net income from operations (line 7.) and nonoperating gains and losses (line 8e.).
10. *Extraordinary gains and losses* means gains or losses unusual in amount and nonrecurring in nature that do not result from normal operating activities. Events or transactions that occur frequently in the health care environment, such as large, unrestricted gifts, cannot be regarded as extraordinary, regardless of their financial effect, and are to be included in ordinary income.
11. *Net income* means the sum of lines 9. and 10.

Supplemental Items***

1. *Funded depreciation* means cash resources which have been set aside and accumulated for the purpose of financing the renewal or replacement of plant assets.
- 2a. *Medicare gross patient revenue* means full hospital charges for all hospital services provided to Medicare patients.
- 2b. *Medicaid gross patient revenue* means full hospital charges for all hospital services provided to Medicaid patients.
- 2c. *Other government patient revenue* means full hospital charges for all hospital services provided to other government patients, including CHAMPUS, government retirement and Crippled Children's Service.
- 2d. *Nongovernment patient revenue* means full hospital charges for all hospital services provided to nongovernment patients, including those with private insurance, those belonging to HMOs or PPOs, and those without insurance.

AUTHORITY: section 192.667, RSMo [Supp.1992] 2000. Emergency rule filed Nov. 4, 1992, effective Nov. 14, 1992, expired March 13, 1993. Emergency rule filed March 4, 1993, effective March 14, 1993, expired July 11, 1993. Original rule filed Nov. 4, 1992, effective June 7, 1993. Emergency amendment filed April 1, 1993, effective April 11, 1993, expired Aug. 8, 1993. Emergency amendment filed Aug. 10, 1993, effective Aug. 20, 1993, expired Nov. 18, 1993. Amended: Filed April 1, 1993, effective Dec. 9, 1993. Amended: Filed April 13, 2001.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than \$500 in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than \$500 in the aggregate.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Missouri Department of Health, Center for Health Information Management and Epidemiology, Garland Land, Director, PO Box 570, Jefferson City, MO 65102, (573) 751-6272. To be considered, comments must be received within thirty days after the publication of this notice in the **Missouri Register**. No public hearing is scheduled.

This section will contain the final text of the rules proposed by agencies. The order of rulemaking is required to contain a citation to the legal authority upon which the order of rulemaking is based; reference to the date and page or pages where the notice of proposed rulemaking was published in the *Missouri Register*; an explanation of any change between the text of the rule as contained in the notice of proposed rulemaking and the text of the rule as finally adopted, together with the reason for any such change; and the full text of any section or subsection of the rule as adopted which has been changed from that contained in the notice of proposed rulemaking. The effective date of the rule shall be not less than 30 days after the date of publication of the revision to the *Code of State Regulations*.

The agency is also required to make a brief summary of the general nature and extent of comments submitted in support of or opposition to the proposed rule and a concise summary of the testimony presented at the hearing, if any, held in connection with the rulemaking, together with a concise summary of the agency's findings with respect to the merits of any such testimony or comments which are opposed in whole or in part to the proposed rule. The 90-day period during which an agency shall file its order of rulemaking for publication in the *Missouri Register* begins either: 1) after the hearing on the proposed rulemaking is held; or 2) at the end of the time for submission of comments to the agency. During this period, the agency shall file with the secretary of state the order of rulemaking, either putting the proposed rule into effect, with or without further changes, or withdrawing the proposed rule.

**Title 8—DEPARTMENT OF LABOR AND
INDUSTRIAL RELATIONS
Division 60—Missouri Commission on Human Rights
Chapter 3—Guidelines and Interpretations of
Employment Anti-Discrimination Laws**

ORDER OF RULEMAKING

By the authority vested in the Missouri Commission on Human Rights under section 213.030(6), RSMo 2000, the commission amends a rule as follows:

8 CSR 60-3.040 Employment Practices Related to Men and Women is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on February 1, 2001 (26 MoReg 333-334). No changes have been made in the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: The Missouri Commission on Human Rights received three (3) comments regarding the proposed amendment.

COMMENT: The Missouri Commission on Human Rights (MCHR) received a comment from Associated Industries of Missouri supporting the proposed amendment but asked that sub-

section (D) be revised to delete the language permitting employers to be held liable for the acts of supervisors who have no actual ability to influence employment decisions about harassed employees. The MCHR received a comment from the Missouri Hospital Association, which did not explicitly support the proposed amendment but asked that the Missouri Commission on Human Rights revise the proposed amendment specifically subsection (C) and subsection (D). The Missouri Hospital Association had two concerns regarding subsection (C): that subsection (C) does not allow a defense similar to subsection (D)1. and the addition of the term "employees" is inconsistent with the purpose of the rule. The Missouri Hospital Association was concerned with the subsection (D) which, included the language "other supervisors who the employee reasonably believes has the ability to significantly influence employment decisions affecting him or her even if the harasser is outside the employee's chain of command." They believe this provides greater protection than the federal standard. The MCHR received a comment from the St. Louis Chapter of the National Employment Lawyers' Association (NELA) opposing the proposed amendment because federal standards are unfaithful to the text of the Missouri Human Rights Act and the twin goals of the Missouri Human Rights Act as articulated by NELA as compensation and deterrence.

RESPONSE: The MCHR has carefully reviewed the comments of Associated Industries of Missouri and the Missouri Hospital Association and notes that section (17) subsection (C) and (D) are an accurate articulation of the federal standard for employer liability for sexual harassment as articulated by the United States Supreme Court in *Faragher v. City of Boca Raton*, 524 U.S. 775 (1998) and *Burlington Industries, Inc. v. Ellerth*, 524 U.S. 742 (1998) and clarified by the U.S. Equal Employment Opportunity Commission in *Enforcement Guidance: Vicarious Liability for Unlawful Harassment by Supervisors*. The MCHR has also carefully reviewed the comments of the St. Louis Chapter of the National Employment Lawyers Association and notes that there is no conflict between the language of the Missouri Human Rights Act and the proposed amendment and that the proposed amendment provides a balanced approach to compensation and deterrence.

**Title 8—DEPARTMENT OF LABOR AND
INDUSTRIAL RELATIONS
Division 70—Missouri Assistive Technology Advisory
Council
Chapter 1—Assistive Technology Programs**

ORDER OF RULEMAKING

By the authority vested in the Missouri Assistive Technology Advisory Council under section 209.253, RSMo 2000, the council amends a rule as follows:

8 CSR 70-1.010 Telecommunications Access Program is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on February 1, 2001 (26 MoReg 334-335). No changes have been made in the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

Title 13—DEPARTMENT OF SOCIAL SERVICES
Division 40—Division of Family Services
Chapter 31—Child Abuse

ORDER OF RULEMAKING

By the authority vested in the director of the Division of Family Services under section 207.020, RSMo 2000, the director hereby rescinds a rule as follows:

13 CSR 40-31.050 Child Fatality Review Process is **rescinded**.

A notice of proposed rulemaking containing the proposed rescission was published in the *Missouri Register* on January 16, 2001 (26 MoReg 226). No changes have been made in the proposed rescission, so it is not reprinted here. This proposed rescission becomes effective thirty days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

Title 13—DEPARTMENT OF SOCIAL SERVICES
Division 40—Division of Family Services
Chapter 32—Child Care

ORDER OF RULEMAKING

By the authority vested in the director of the Division of Family Services under section 210.025, RSMo 2000, the director hereby adopts a rule as follows:

13 CSR 40-32.020 Processing of Applications for State and Federal Funds for Providing Child Care Services is **adopted**.

A notice of proposed rulemaking containing the text of the proposed rule was published in the *Missouri Register* on January 16, 2001 (26 MoReg 226–228). No changes have been made in the text of the proposed rule, so it is not reprinted here. This proposed rule becomes effective thirty days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENT: No comments were received.

Title 13—DEPARTMENT OF SOCIAL SERVICES
Division 45—Division of Legal Services
Chapter 2—State Technical Assistance Team

ORDER OF RULEMAKING

By the authority vested in the directors of the Department of Social Services and the Division of Legal Services under sections 210.192 to 210.196, 660.017 and 660.520 to 660.526, RSMo 2000, the directors hereby adopt a rule as follows:

13 CSR 45-2.010 Organization and Operation is **adopted**.

A notice of proposed rulemaking containing the text of the proposed rule was published in the *Missouri Register* on January 16, 2001 (26 MoReg 228–245). No changes have been made in the text of the proposed rule, so it is not reprinted here. This proposed rule becomes effective thirty days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

Title 13—DEPARTMENT OF SOCIAL SERVICES
Division 70—Division of Medical Services
Chapter 20—Pharmacy Program

ORDER OF RULEMAKING

By the authority vested in the director of the Division of Medical Services under sections 208.152, 208.153 and 208.201, RSMo 2000, the director hereby amends a rule as follows:

13 CSR 70-20.045 Thirty-One Day Supply Maximum Restriction on Pharmacy Services Reimbursed by the Division of Medical Services is **amended**.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on January 16, 2001 (26 MoReg 246). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: The Division of Medical Services received one comment.

COMMENT: The Pharmacy Committee of the Missouri Retailer Association supports the adoption of the rule. Restricting maximum drug supplies to thirty-one days for fee-for-service patients would help contain Medicaid pharmaceutical cost without unduly inconveniencing or endangering the health of Medicaid patients and would not create any significant burdens for providers.

RESPONSE: The division agrees with and appreciates the comment.

Title 13—DEPARTMENT OF SOCIAL SERVICES
Division 70—Division of Medical Services
Chapter 20—Pharmacy Program

ORDER OF RULEMAKING

By the authority vested in the director of the Division of Medical Services under sections 208.152, 208.153 and 208.201, RSMo 2000, the director hereby amends a rule as follows:

13 CSR 70-20.070 is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on January 16, 2001 (26 MoReg 246–248). Those sections with changes are reprinted here. This proposed amendment becomes effective thirty days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: The Division of Medical Services received two comments expressing concerns about using Required Reported Price (RRP) for pricing pharmaceutical products.

COMMENT: The Missouri Pharmacy Association commented that Required Reported Price (RRP) appears to be a contrived price determined by the investigations of the U.S. Department of Justice and Office of the Inspector General. This pricing is not updated to reflect current acquisition pricing. The RRP pricing is not reflective of the marketplace cost of pharmaceutical products. The use of RRP pricing has been indefinitely suspended by the Health Care Financing Administration as a basis for Medicare reimbursement largely for the reasons cited above.

COMMENT: Both the Missouri Home Infusion Association and the Missouri Pharmacy Association raised issue of using RRP as a reimbursement methodology for intravenous therapy in the home.

According to the two comments, current reimbursement has marginally compensated infusion providers for their services. If RRP were implemented some new mechanism for reimbursement for equipment and supplies would be needed. Otherwise, a tremendous financial hardship will be created for home infusion providers and the quality of care of their patients would be jeopardized.

RESPONSE AND EXPLANATION OF CHANGE: The Division of Medical Services is aware of these issues and will not add Required Reported Price (RRP) to the Drug Pricing Tape at this time in order to address the concerns expressed by both commenters.

13 CSR 70-20.070 Computer-Generated Drug Pricing Tape and Drug Reimbursement Methodology

(1) The Division of Medical Services will obtain, by contract with a reputable medical publishing company, a weekly computer-generated tape which will provide the information needed to price all fee-for-service Medicaid drug claims. The tape will contain *National Drug Code* (NDC), drug name, drug strength, dosage form, package size, the Average Wholesale Price (AWP), the prices set by direct-selling manufacturers (direct prices), Wholesaler Acquisition Cost (WAC), and federal Health and Human Services upper limits for specified multiple source drugs. A multiple source drug is defined as a drug marketed or sold by two (2) or more manufacturers or labelers, or a drug marketed or sold by the same manufacturer or labeler under two (2) or more different proprietary names or both under a proprietary name and without that name.

(3) Reimbursement for covered drugs will be made at the lower of the—

(B) Price(s) included on the Drug Pricing File which is derived from one (1) or more of the following:

1. The AWP as furnished by the state's contracted agent, less ten and forty-three hundredths percent (10.43%);
2. The MMAC as determined by the state agency for selected multiple source drugs;
3. Applicable federal upper limits as found at www.dss.state.mo.us/dms; or
4. The WAC as furnished by the state's contracted agent, plus ten percent (10%).

Title 13—DEPARTMENT OF SOCIAL SERVICES

Division 70—Division of Medical Services

Chapter 91—Personal Care Program

ORDER OF RULEMAKING

By the authority vested in the director of the Division of Medical Services under sections 208.152, 208.153 and 208.201, RSMo 2000, the director hereby amends a rule as follows:

13 CSR 70-91.010 Personal Care Program is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on January 16, 2001 (26 MoReg 249-250). No changes have been made in the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

This section may contain notice of hearings, correction notices, public information notices, rule action notices, statements of actual costs and other items required to be published in the *Missouri Register* by law.

**Title 4—DEPARTMENT OF ECONOMIC
DEVELOPMENT
Division 100—Division of Credit Unions**

**APPLICATIONS FOR NEW GROUPS OR
GEOGRAPHIC AREAS**

Pursuant to section 370.081(4), RSMo 2000, the Director of the Missouri Division of Credit Unions is required to cause notice to be published that the following credit unions have submitted applications to add new groups or geographic areas to their membership.

Credit Union	Proposed New Group or Geographic Area
Mazuma Credit Union 9300 Troost Kansas City, MO 64131	Jackson County

*NOTICE TO SUBMIT COMMENTS: Anyone may file a written statement in support of or in opposition to any of these applications. Comments shall be filed with: Director, Division of Credit Unions, PO Box 1607, Jefferson City, MO 65102. To be considered, written comments must be submitted no later than ten business days after publication of this notice in the **Missouri Register**.*

**Title 4—DEPARTMENT OF ECONOMIC
DEVELOPMENT
Division 100—Division of Credit Unions**

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Pursuant to section 370.081(4), RSMo 2000, the Director of the Missouri Division of Credit Unions is required to cause notice to be published that the following credit unions have submitted applications to add new groups or geographic areas to their membership.

Credit Union	Proposed New Group or Geographic Area
Anheuser Busch Employees' Credit Union 1001 Lynch Street St. Louis, MO 63118	People who live or work in the 63104 zip code and the remainder of the Souldard Historic District

*NOTICE TO SUBMIT COMMENTS: Anyone may file a written statement in support of or in opposition to any of these applications. Comments shall be filed with: Director, Division of Credit Unions, PO Box 1607, Jefferson City, MO 65102. To be considered, written comments must be submitted no later than ten business days after publication of this notice in the **Missouri Register**.*

**OFFICE OF ADMINISTRATION
Division of Purchasing**

BID OPENINGS

Sealed Bids in one (1) copy will be received by the Division of Purchasing, Room 580, Truman Building, PO Box 809, Jefferson City, MO 65102, telephone (573) 751-2387 at 2:00 p.m. on dates specified below for various agencies throughout Missouri. Bids are available to download via our homepage: www.moolb.state.mo.us. Prospective bidders may receive specifications upon request.

B1E01360 Sheetting, Sign For Gerber #GA8500 5/16/01;
B1E01372 Dairy Products: Cape VH5/16/01;
B1E01371 Frozen Food: Cheese Pizza 5/17/01;
B2Z01033 Disaster Recovery Contingency Services 5/17/01;
B1E01376 Meat Products: Chicken Breakfast Sausage Pattie 5/21/01;
B1E01377 Meat Product-Salisbury Steak 5/21/01;
B3Z01168 Evaluation & Consulting Services 5/21/01;
B1E01366 Furniture: Cabin 5/22/01;
B1E01373 Shoe Uppers 5/22/01;
B3Z01185 Satellite Space Services 5/22/01;
B3Z01193 Insurance Broker-OCIP 5/22/01;
B3Z01196 Transcription Services-Medical 5/22/01;
B1E01353 Polyethylene Bags 5/23/01;
B1E01378 Meat Products: Beef Crumble 5/23/01;
B1E01379 Dairy Products: Cheese 5/23/01;
B1E01380 Dairy Products-CCC 5/23/01;
B1Z01386 Meats-July 5/23/01;
B2Z01038 Fiber Optic & Copper Cable Installation 5/23/01;
B1E01383 Flares, Safety: Fuse Type 5/24/01;
B3Z01172 Transportation Services: Bus 5/24/01;
B3E01221 Janitorial Services 5/29/01;
B3Z01226 Medical Laboratory Services 6/11/01.

It is the intent of the state of Missouri, Division of Purchasing to purchase the following as a single feasible source without competitive bids. If suppliers exist other than the one identified, contact (573) 751-2387 immediately.

Computer System Access and Maintenance Services, supplied by REJIS Commission.

1) Firearms Training Equipment, supplied by Firearms Training Systems, Inc. 2.) Administration In Sexual Assault Prevention, supplied by Missouri Coalition Against Sexual Assault (MoCASA).

1.) Regional Arthritis Center, supplied by St. John's Regional Health Center-Springfield; St. Luke's Hospital-Kansas City; St. Francis Medical Center-Cape Girardeau; Kirksville College of Osteopathic Medicine; University of Missouri, Columbia; and Heartland Regional Medical Center, Arthritis Community Services. 2.) Accreditation Facilitation, supplied by the National Association for the Education of Young Children; National Association for Family Child Care; National Early Childhood Program Accreditation; Missouri Accreditation; Council on Accreditation; National School-Age Care Alliance; and CARF.

Hach Chemical Tests, supplied by Hach Company of Loveland, Colorado.

James Miluski, CPPO,
Acting Director of Purchasing

**Rule Changes Since Update to
Code of State Regulations**

This cumulative table gives you the latest status of rules. It contains citations of rulemakings adopted or proposed after deadline for the monthly Update Service to the *Code of State Regulations*, citations are to volume and page number in the *Missouri Register*, except for material in this issue. The first number in the table cite refers to the volume number or the publication year—24 (1999), 25 (2000) and 26 (2001). MoReg refers to *Missouri Register* and the numbers refer to a specific *Register* page, R indicates a rescission, W indicates a withdrawal, S indicates a statement of actual cost, T indicates an order terminating a rule, N.A. indicates not applicable and RUC indicates a rule under consideration.

Rule Number	Agency	Emergency	Proposed	Order	In Addition
OFFICE OF ADMINISTRATION					
1 CSR 10	State Officials' Salary Compensation Schedule				24 MoReg 2535
				25 MoReg 2478
1 CSR 10-15.010	Commission of Administration	26 MoReg 103	26 MoReg 641		
1 CSR 15-2.200	Administrative Hearing Commission		26 MoReg 390		
1 CSR 15-2.290	Administrative Hearing Commission		26 MoReg 390		
1 CSR 15-2.450	Administrative Hearing Commission		26 MoReg 391		
1 CSR 15-2.560	Administrative Hearing Commission		26 MoReg 391		
1 CSR 15-3.200	Administrative Hearing Commission		26 MoReg 391		
1 CSR 15-3.210	Administrative Hearing Commission		26 MoReg 392		
1 CSR 15-3.290	Administrative Hearing Commission		26 MoReg 392		
1 CSR 15-3.320	Administrative Hearing Commission		26 MoReg 392		
1 CSR 15-3.350	Administrative Hearing Commission		26 MoReg 393		
1 CSR 15-3.380	Administrative Hearing Commission		26 MoReg 394		
1 CSR 15-3.450	Administrative Hearing Commission		26 MoReg 395		
1 CSR 15-3.490	Administrative Hearing Commission		26 MoReg 395		
1 CSR 15-3.560	Administrative Hearing Commission		26 MoReg 395		
1 CSR 15-5.210	Administrative Hearing Commission		26 MoReg 396R		
1 CSR 15-5.230	Administrative Hearing Commission		26 MoReg 396R		
1 CSR 15-5.250	Administrative Hearing Commission		26 MoReg 396R		
1 CSR 15-5.270	Administrative Hearing Commission		26 MoReg 397R		
1 CSR 15-5.290	Administrative Hearing Commission		26 MoReg 397R		
1 CSR 15-5.320	Administrative Hearing Commission		26 MoReg 397R		
1 CSR 15-5.350	Administrative Hearing Commission		26 MoReg 397R		
1 CSR 15-5.380	Administrative Hearing Commission		26 MoReg 398R		
1 CSR 15-5.390	Administrative Hearing Commission		26 MoReg 398R		
1 CSR 15-5.410	Administrative Hearing Commission		26 MoReg 398R		
1 CSR 15-5.420	Administrative Hearing Commission		26 MoReg 398R		
1 CSR 15-5.430	Administrative Hearing Commission		26 MoReg 399R		
1 CSR 15-5.450	Administrative Hearing Commission		26 MoReg 399R		
1 CSR 15-5.470	Administrative Hearing Commission		26 MoReg 399R		
1 CSR 15-5.480	Administrative Hearing Commission		26 MoReg 399R		
1 CSR 15-5.490	Administrative Hearing Commission		26 MoReg 400R		
1 CSR 15-5.510	Administrative Hearing Commission		26 MoReg 400R		
1 CSR 15-5.530	Administrative Hearing Commission		26 MoReg 400R		
1 CSR 15-5.560	Administrative Hearing Commission		26 MoReg 400R		
1 CSR 15-5.580	Administrative Hearing Commission		26 MoReg 401R		
1 CSR 15-6.210	Administrative Hearing Commission		26 MoReg 401R		
1 CSR 15-6.230	Administrative Hearing Commission		26 MoReg 401R		
1 CSR 15-6.250	Administrative Hearing Commission		26 MoReg 401R		
1 CSR 15-6.270	Administrative Hearing Commission		26 MoReg 402R		
1 CSR 15-6.290	Administrative Hearing Commission		26 MoReg 402R		
1 CSR 15-6.320	Administrative Hearing Commission		26 MoReg 402R		
1 CSR 15-6.350	Administrative Hearing Commission		26 MoReg 402R		
1 CSR 15-6.380	Administrative Hearing Commission		26 MoReg 403R		
1 CSR 15-6.390	Administrative Hearing Commission		26 MoReg 403R		
1 CSR 15-6.410	Administrative Hearing Commission		26 MoReg 403R		
1 CSR 15-6.420	Administrative Hearing Commission		26 MoReg 403R		
1 CSR 15-6.430	Administrative Hearing Commission		26 MoReg 404R		
1 CSR 15-6.450	Administrative Hearing Commission		26 MoReg 404R		
1 CSR 15-6.470	Administrative Hearing Commission		26 MoReg 404R		
1 CSR 15-6.480	Administrative Hearing Commission		26 MoReg 404R		
1 CSR 15-6.490	Administrative Hearing Commission		26 MoReg 405R		
1 CSR 15-6.510	Administrative Hearing Commission		26 MoReg 405R		
1 CSR 15-6.530	Administrative Hearing Commission		26 MoReg 405R		
1 CSR 15-6.560	Administrative Hearing Commission		26 MoReg 405R		
1 CSR 15-6.580	Administrative Hearing Commission		26 MoReg 406R		
1 CSR 20-5.010	Personnel Advisory Board and Division of Personnel		25 MoReg 2872	26 MoReg 865	
1 CSR 20-5.020	Personnel Advisory Board and Division of Personnel		25 MoReg 2872	26 MoReg 865	
1 CSR 20-6.010	Personnel Advisory Board and Division of Personnel		25 MoReg 2873	26 MoReg 865	
DEPARTMENT OF AGRICULTURE					
2 CSR 10-5.005	Market Development	24 MoReg 2269			
2 CSR 70-13.030	Plant Industries		26 MoReg 905		
2 CSR 80-5.010	State Milk Board		26 MoReg 909		
2 CSR 90-21.060	Weights and Measures		25 MoReg 2788	26 MoReg 865	

Rule Number	Agency	Emergency	Proposed	Order	In Addition
DEPARTMENT OF CONSERVATION					
3 CSR 10-4.111	Conservation Commission		26 MoReg 319	26 MoReg 866	
3 CSR 10-4.115	Conservation Commission		26 MoReg 319	26 MoReg 866	
3 CSR 10-4.116	Conservation Commission		26 MoReg 646		
3 CSR 10-11.805	Conservation Commission		26 MoReg 649		
DEPARTMENT OF ECONOMIC DEVELOPMENT					
4 CSR 30-6.015	Architects, Professional Engineers and Professional Land Surveyors		26 MoReg 12	26 MoReg 866	
4 CSR 30-6.020	Architects, Professional Engineers and Professional Land Surveyors		26 MoReg 17	26 MoReg 866	
4 CSR 40-1.021	Office of Athletics	21 MoReg 2680			
4 CSR 40-5.070	Office of Athletics	21 MoReg 1963			
4 CSR 60-1.025	State Board of Barber Examiners		26 MoReg 20	26 MoReg 866	
4 CSR 60-1.030	State Board of Barber Examiners		26 MoReg 22	26 MoReg 867	
4 CSR 60-4.015	State Board of Barber Examiners		26 MoReg 24	26 MoReg 867	
4 CSR 90-7.010	State Board of Cosmetology		26 MoReg 322R		
			26 MoReg 322		
4 CSR 90-8.010	State Board of Cosmetology		26 MoReg 697R		
			26 MoReg 697		
4 CSR 90-11.010	State Board of Cosmetology		26 MoReg 328		
4 CSR 90-13.010	State Board of Cosmetology		26 MoReg 24	26 MoReg 867	
4 CSR 100	Division of Credit Unions				26 MoReg 660
					26 MoReg 826
					26 MoReg 826
					This Issue
					This Issue
4 CSR 100-2.045	Division of Credit Unions		25 MoReg 2877	26 MoReg 817	
4 CSR 100-2.185	Division of Credit Unions		26 MoReg 174	26 MoReg 949	
4 CSR 100-2.220	Division of Credit Unions		26 MoReg 174	26 MoReg 949	
4 CSR 120-2.100	State Board of Embalmers and Funeral Directors				This Issue
4 CSR 140-2.070	Division of Finance		26 MoReg 328		
4 CSR 140-2.138	Division of Finance		26 MoReg 328		
4 CSR 140-6.085	Division of Finance		26 MoReg 329		
4 CSR 145-1.040	Missouri Board of Geologist Registration				This Issue
4 CSR 150-2.050	State Board of Registration for the Healing Arts				This Issue
4 CSR 150-2.080	State Board of Registration for the Healing Arts				This Issue
4 CSR 150-2.125	State Board of Registration for the Healing Arts				This Issue
4 CSR 150-2.165	State Board of Registration for the Healing Arts				This Issue
4 CSR 150-4.060	State Board of Registration for the Healing Arts		26 MoReg 330		
4 CSR 150-8.060	State Board of Registration for the Healing Arts				This Issue
4 CSR 200-2.001	State Board of Nursing		26 MoReg 27	26 MoReg 867	
4 CSR 200-2.010	State Board of Nursing		26 MoReg 28	26 MoReg 867	
4 CSR 200-2.020	State Board of Nursing		26 MoReg 29	26 MoReg 868	
4 CSR 200-2.030	State Board of Nursing		26 MoReg 30	26 MoReg 868	
4 CSR 200-2.050	State Board of Nursing		26 MoReg 30	26 MoReg 868	
4 CSR 200-2.110	State Board of Nursing		26 MoReg 30	26 MoReg 868	
4 CSR 200-2.120	State Board of Nursing		26 MoReg 30	26 MoReg 868	
4 CSR 200-2.180	State Board of Nursing		26 MoReg 31	26 MoReg 869	
4 CSR 200-3.001	State Board of Nursing		26 MoReg 31	26 MoReg 869	
4 CSR 200-3.010	State Board of Nursing		26 MoReg 33	26 MoReg 869	
4 CSR 200-3.020	State Board of Nursing		26 MoReg 34	26 MoReg 869	
4 CSR 200-3.030	State Board of Nursing		26 MoReg 34	26 MoReg 869	
4 CSR 200-3.050	State Board of Nursing		26 MoReg 34	26 MoReg 869	
4 CSR 200-3.110	State Board of Nursing		26 MoReg 34	26 MoReg 870	
4 CSR 200-3.120	State Board of Nursing		26 MoReg 35	26 MoReg 870	
4 CSR 200-3.180	State Board of Nursing		26 MoReg 35	26 MoReg 870	
4 CSR 200-4.010	State Board of Nursing	26 MoReg 112	26 MoReg 175	26 MoReg 949	
4 CSR 205-4.010	Missouri Board of Occupational Therapy		26 MoReg 859		
4 CSR 205-4.020	Missouri Board of Occupational Therapy		26 MoReg 859		
4 CSR 220-2.018	State Board of Pharmacy		25 MoReg 2789	26 MoReg 958	
4 CSR 220-2.030	State Board of Pharmacy		25 MoReg 2789	26 MoReg 958	
4 CSR 220-2.032	State Board of Pharmacy		26 MoReg 698		
4 CSR 220-2.080	State Board of Pharmacy		25 MoReg 2790	26 MoReg 958	
4 CSR 220-2.085	State Board of Pharmacy				This Issue
4 CSR 220-2.090	State Board of Pharmacy		25 MoReg 2791	26 MoReg 958	
4 CSR 220-2.300	State Board of Pharmacy		25 MoReg 2791R	26 MoReg 959R	
			25 MoReg 2791	26 MoReg 959	
4 CSR 220-2.900	State Board of Pharmacy		25 MoReg 2792	26 MoReg 960	
4 CSR 220-4.010	State Board of Pharmacy		26 MoReg 698		
4 CSR 220-5.020	State Board of Pharmacy		25 MoReg 2795	26 MoReg 961	
					This Issue
4 CSR 220-5.030	State Board of Pharmacy		25 MoReg 2795	26 MoReg 961	
4 CSR 231-2.010	Division of Professional Registration		26 MoReg 699		
4 CSR 232-1.040	Missouri State Committee of Interpreters		26 MoReg 35	26 MoReg 870	
4 CSR 232-3.010	Missouri State Committee of Interpreters		26 MoReg 39	26 MoReg 870	
4 CSR 235-1.020	State Committee of Psychologists		26 MoReg 700		
4 CSR 235-2.060	State Committee of Psychologists		26 MoReg 700R		
			26 MoReg 700		
4 CSR 240-32.130	Public Service Commission		26 MoReg 330		
4 CSR 240-32.140	Public Service Commission		26 MoReg 331		
4 CSR 240-32.150	Public Service Commission		26 MoReg 331		
4 CSR 240-32.160	Public Service Commission		26 MoReg 331		
4 CSR 240-32.170	Public Service Commission		26 MoReg 332		

Rule Number	Agency	Emergency	Proposed	Order	In Addition
4 CSR 240-40.020	Public Service Commission	26 MoReg 181	26 MoReg 870		
4 CSR 240-40.030	Public Service Commission	26 MoReg 181	26 MoReg 871		
4 CSR 245-5.010	Real Estate Appraisers	This Issue			
4 CSR 245-5.020	Real Estate Appraisers	This Issue			
4 CSR 255-1.040	Missouri Board for Respiratory Care	26 MoReg 860			
4 CSR 255-2.020	Missouri Board for Respiratory Care	26 MoReg 493			
4 CSR 255-2.030	Missouri Board for Respiratory Care	26 MoReg 493			
4 CSR 255-2.050	Missouri Board for Respiratory Care	26 MoReg 494			
4 CSR 255-2.060	Missouri Board for Respiratory Care	26 MoReg 496R			
	26 MoReg 496			
4 CSR 255-4.010	Missouri Board for Respiratory Care	26 MoReg 501R			
	26 MoReg 501			
4 CSR 265-10.030	Division of Motor Carrier and Railroad Safety	26 MoReg 112	26 MoReg 203	26 MoReg 961	
4 CSR 270-1.011	Missouri Veterinary Medical Board	This Issue			
4 CSR 270-1.021	Missouri Veterinary Medical Board	This Issue			
4 CSR 270-1.050	Missouri Veterinary Medical Board	This IssueR			
	This Issue			
4 CSR 270-2.011	Missouri Veterinary Medical Board	This Issue			
4 CSR 270-2.021	Missouri Veterinary Medical Board	This Issue			
4 CSR 270-2.052	Missouri Veterinary Medical Board	This Issue			
4 CSR 270-2.070	Missouri Veterinary Medical Board	This Issue			
4 CSR 270-2.071	Missouri Veterinary Medical Board	This Issue			
4 CSR 270-3.020	Missouri Veterinary Medical Board	This Issue			
4 CSR 270-3.030	Missouri Veterinary Medical Board	This Issue			
4 CSR 270-3.040	Missouri Veterinary Medical Board	This Issue			
4 CSR 270-4.042	Missouri Veterinary Medical Board	This Issue			
4 CSR 270-4.050	Missouri Veterinary Medical Board	This Issue			
4 CSR 270-4.060	Missouri Veterinary Medical Board	This Issue			
4 CSR 270-5.011	Missouri Veterinary Medical Board	This Issue			
4 CSR 270-7.020	Missouri Veterinary Medical Board	This Issue			
DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION					
5 CSR 30-261.010	Division of School Services	25 MoReg 2632	26 MoReg 817		
5 CSR 30-261.025	Division of School Services	26 MoReg 912			
5 CSR 30-345.011	Division of School Services	25 MoReg 2633	26 MoReg 817		
5 CSR 50-350.040	Division of Instruction	25 MoReg 2636	26 MoReg 817		
	<i>(Changed from 5 CSR 60-120.060)</i>				
5 CSR 50-378.100	Division of Instruction	25 MoReg 2633	26 MoReg 821		
5 CSR 60-100.020	Vocational and Adult Education	26 MoReg 915			
5 CSR 60-120.010	Vocational and Adult Education	N.A.	26 MoReg 821		
5 CSR 60-120.060	Vocational and Adult Education	25 MoReg 2636			
	<i>(Changed to 5 CSR 50-350.040)</i>				
5 CSR 60-120.080	Vocational and Adult Education	26 MoReg 209			
5 CSR 80-800.200	Teacher Quality and Urban Education	26 MoReg 918			
5 CSR 80-800.220	Teacher Quality and Urban Education	26 MoReg 918			
5 CSR 80-800.230	Teacher Quality and Urban Education	26 MoReg 919			
5 CSR 80-800.260	Teacher Quality and Urban Education	26 MoReg 919			
5 CSR 80-800.270	Teacher Quality and Urban Education	26 MoReg 922			
5 CSR 80-800.280	Teacher Quality and Urban Education	26 MoReg 922			
5 CSR 80-800.350	Teacher Quality and Urban Education	26 MoReg 923			
5 CSR 80-800.360	Teacher Quality and Urban Education	26 MoReg 925			
5 CSR 80-800.380	Teacher Quality and Urban Education	26 MoReg 926			
5 CSR 90-4.120	Vocational Rehabilitation	26 MoReg 212			
5 CSR 90-5.400	Vocational Rehabilitation	26 MoReg 212			
5 CSR 90-5.440	Vocational Rehabilitation	26 MoReg 214			
DEPARTMENT OF TRANSPORTATION					
7 CSR 10-10.010	Highways and Transportation Commission	26 MoReg 5	26 MoReg 39	26 MoReg 871	
7 CSR 10-10.030	Highways and Transportation Commission	26 MoReg 6	26 MoReg 40	26 MoReg 871	
7 CSR 10-10.040	Highways and Transportation Commission	26 MoReg 7	26 MoReg 41	26 MoReg 871	
7 CSR 10-10.050	Highways and Transportation Commission	26 MoReg 8	26 MoReg 41	26 MoReg 871	
7 CSR 10-10.060	Highways and Transportation Commission	26 MoReg 8	26 MoReg 45	26 MoReg 872	
7 CSR 10-10.070	Highways and Transportation Commission	26 MoReg 9	26 MoReg 45	26 MoReg 872	
7 CSR 10-10.080	Highways and Transportation Commission	26 MoReg 10	26 MoReg 46	26 MoReg 872	
7 CSR 10-10.090	Highways and Transportation Commission	26 MoReg 11	26 MoReg 46	26 MoReg 872	
DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS					
8 CSR 10-4.080	Division of Employment Security	26 MoReg 333			
8 CSR 30-3.010	Division of Labor Standards	25 MoReg 2877	26 MoReg 823		
8 CSR 60-3.040	Missouri Commission on Human Rights	26 MoReg 333	This Issue		
8 CSR 70-1.010	MO Assistive Technology Advisory Council	26 MoReg 317	26 MoReg 334	This Issue	
DEPARTMENT OF MENTAL HEALTH					
9 CSR 10-5.210	Director, Department of Mental Health	26 MoReg 705			
9 CSR 10-7.010	Director, Department of Mental Health	26 MoReg 708			
9 CSR 10-7.020	Director, Department of Mental Health	26 MoReg 710			
9 CSR 10-7.030	Director, Department of Mental Health	26 MoReg 711			
9 CSR 10-7.040	Director, Department of Mental Health	26 MoReg 714			
9 CSR 10-7.050	Director, Department of Mental Health	26 MoReg 714			

Rule Number	Agency	Emergency	Proposed	Order	In Addition
9 CSR 10-7.060	Director, Department of Mental Health.....		26 MoReg 715		
9 CSR 10-7.070	Director, Department of Mental Health.....		26 MoReg 716		
9 CSR 10-7.080	Director, Department of Mental Health.....		26 MoReg 717		
9 CSR 10-7.090	Director, Department of Mental Health.....		26 MoReg 718		
9 CSR 10-7.100	Director, Department of Mental Health.....		26 MoReg 719		
9 CSR 10-7.110	Director, Department of Mental Health.....		26 MoReg 719		
9 CSR 10-7.120	Director, Department of Mental Health.....		26 MoReg 720		
9 CSR 10-7.130	Director, Department of Mental Health.....		26 MoReg 723		
9 CSR 10-7.140	Director, Department of Mental Health.....		26 MoReg 725		
9 CSR 25-2.105	Fiscal Management		25 MoReg 2805	26 MoReg 823	
9 CSR 25-2.305	Fiscal Management		25 MoReg 2806	26 MoReg 823	
9 CSR 30-3.010	Certification Standards.....		26 MoReg 728R		
9 CSR 30-3.020	Certification Standards.....		26 MoReg 728R		
9 CSR 30-3.022	Certification Standards.....		26 MoReg 728		
9 CSR 30-3.030	Certification Standards.....		26 MoReg 729R		
9 CSR 30-3.032	Certification Standards.....		26 MoReg 729		
9 CSR 30-3.040	Certification Standards.....		26 MoReg 730R		
9 CSR 30-3.050	Certification Standards.....		26 MoReg 730R		
9 CSR 30-3.060	Certification Standards.....		26 MoReg 731R		
9 CSR 30-3.070	Certification Standards.....		26 MoReg 731R		
9 CSR 30-3.080	Certification Standards.....		26 MoReg 731R		
9 CSR 30-3.100	Certification Standards.....		26 MoReg 731		
9 CSR 30-3.110	Certification Standards.....		26 MoReg 735		
9 CSR 30-3.120	Certification Standards.....		26 MoReg 737		
9 CSR 30-3.130	Certification Standards.....		26 MoReg 739		
9 CSR 30-3.132	Certification Standards.....		26 MoReg 750		
	(<i>Changed from 9 CSR 30-3.610</i>)				
9 CSR 30-3.134	Certification Standards.....		26 MoReg 753		
	(<i>Changed from 9 CSR 30-3.611</i>)				
9 CSR 30-3.140	Certification Standards.....		26 MoReg 741		
9 CSR 30-3.150	Certification Standards.....		26 MoReg 742		
9 CSR 30-3.160	Certification Standards.....		26 MoReg 742		
9 CSR 30-3.190	Certification Standards.....		26 MoReg 745		
9 CSR 30-3.192	Certification Standards.....		26 MoReg 746		
9 CSR 30-3.200	Certification Standards.....		26 MoReg 747R		
9 CSR 30-3.201	Certification Standards.....		26 MoReg 758		
	(<i>Changed from 9 CSR 30-3.700</i>)				
9 CSR 30-3.202	Certification Standards.....		26 MoReg 760		
	(<i>Changed from 9 CSR 30-3.730</i>)				
9 CSR 30-3.204	Certification Standards.....		26 MoReg 762		
	(<i>Changed from 9 CSR 30-3.750</i>)				
9 CSR 30-3.206	Certification Standards.....		26 MoReg 764		
	(<i>Changed from 9 CSR 30-3.760</i>)				
9 CSR 30-3.208	Certification Standards.....		26 MoReg 768		
	(<i>Changed from 9 CSR 30-3.790</i>)				
9 CSR 30-3.210	Certification Standards.....		26 MoReg 748R		
9 CSR 30-3.220	Certification Standards.....		26 MoReg 748R		
9 CSR 30-3.230	Certification Standards.....		26 MoReg 768		
	(<i>Changed from 9 CSR 30-3.800</i>)				
9 CSR 30-3.240	Certification Standards.....		26 MoReg 748R		
9 CSR 30-3.250	Certification Standards.....		26 MoReg 748R		
9 CSR 30-3.300	Certification Standards.....		26 MoReg 755		
	(<i>Changed from 9 CSR 30-3.630</i>)				
9 CSR 30-3.400	Certification Standards.....		26 MoReg 749R		
9 CSR 30-3.410	Certification Standards.....		26 MoReg 749R		
9 CSR 30-3.420	Certification Standards.....		26 MoReg 749R		
9 CSR 30-3.500	Certification Standards.....		26 MoReg 749R		
9 CSR 30-3.510	Certification Standards.....		26 MoReg 750R		
9 CSR 30-3.600	Certification Standards.....		26 MoReg 750R		
9 CSR 30-3.610	Certification Standards.....		26 MoReg 750		
	(<i>Changed to 9 CSR 30-3.132</i>)				
9 CSR 30-3.611	Certification Standards.....		26 MoReg 753		
	(<i>Changed to 9 CSR 30-3.134</i>)				
9 CSR 30-3.620	Certification Standards.....		26 MoReg 755R		
9 CSR 30-3.621	Certification Standards.....		26 MoReg 755R		
9 CSR 30-3.630	Certification Standards.....		26 MoReg 755		
	(<i>Changed to 9 CSR 30-3.300</i>)				
9 CSR 30-3.700	Certification Standards.....		26 MoReg 758		
	(<i>Changed to 9 CSR 30-3.201</i>)				
9 CSR 30-3.710	Certification Standards.....		26 MoReg 759R		
9 CSR 30-3.720	Certification Standards.....		26 MoReg 759R		
9 CSR 30-3.730	Certification Standards.....		26 MoReg 760		
	(<i>Changed to 9 CSR 30-3.202</i>)				
9 CSR 30-3.740	Certification Standards.....		26 MoReg 762R		
9 CSR 30-3.750	Certification Standards.....		26 MoReg 762		
	(<i>Changed to 9 CSR 30-3.204</i>)				
9 CSR 30-3.760	Certification Standards.....		26 MoReg 764		
	(<i>Changed to 9 CSR 30-3.206</i>)				
9 CSR 30-3.770	Certification Standards.....		26 MoReg 767R		
9 CSR 30-3.780	Certification Standards.....		26 MoReg 767R		
9 CSR 30-3.790	Certification Standards.....		26 MoReg 768		
	(<i>Changed to 9 CSR 30-3.208</i>)				

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9 CSR 30-3.820	Certification Standards.....		26 MoReg 772R		
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9 CSR 30-3.840	Certification Standards.....		26 MoReg 773R		
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9 CSR 30-3.950	Certification Standards.....		26 MoReg 776R		
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7 CSR 10-10.060 Explanation of Standard Deviation Rating System for all Contractors June 29, 2001

7 CSR 10-10.070 Procedure for Annual Rating of Contractors June 29, 2001

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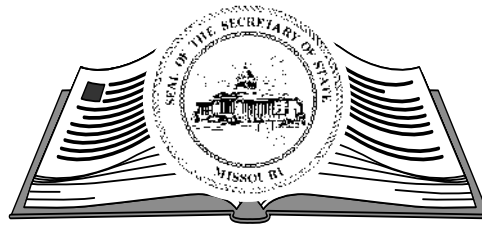
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